## **FILED** 2000 UNIFORM BUSINESS REPORT (UBR) Jun 02, 2000 8:00 am OCUMENT # P-9900029605 Secretary of State MODEL & TALENT SCOUTS INTERNATIONAL, INC 06-02-2000 90007 033 \*\*\*158.75 היי Dusiness היי Business Mailing Address 1440 JOHN F KENNEDY CAUSEWAY # 1424 742018 NORTH BAY YILLAGE FLORIDA 33141 Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 65-0948856 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ELIO A. MORA 1440 JOHN F. KENNEDY CWY # 1424 Street Address (P.O. Box Number is Not Acceptable) MORTH BAY VILLAGE FLORIDA 33141 City Zip Code 8. The above named entity syndrits this stayement for the purpose of changing its registered office or registered agent, or both, in the Staté of Florida REG. AGENT SIGNATURE 🌌 FILE NOW!!! FEE IS \$150.00 This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and eleges to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS TITLE ☐ Change ☐ Addition NAME MORA, ELIO A 140 JOHN F. KENNEDY CSWAY # 1424 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NORTH BAY VILLAGE, FL 33141 CITY-ST-ZIP 3/vp/D Delete Change Addition TITLE NAME GONZALEZ, DIANDRA NAME 1440 JOHN F. KENNEDY BSWSY #1424 STREET ADDRESS STREET ADDRESS NORTH BAY VILLAGE FZ 33141 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete 🗀 NAME . . NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP Delete TITLE ☐ Addition VAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is the and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attaction of the corporation of the corporation of the receiver of trustee empowered.

ALIO A HORA - Pres.

SIGNATUR

APR 2 5 2000