

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2000 8:00 am
Secretary of State

05-04-2000 90124 006 ***150.00

DOCUMENT # P99000030407
 1. Entity Name
S.B.M. MEDIA INTERNATIONAL CORPORATION

Principal Place of Business Mailing Address

652222

2. Principal Place of Business
15340 SW 106 TERR
 Suite, Apt. #, etc.
No. 814
 City & State
Miami, FL
 Zip
33196 Country
U.S.A.

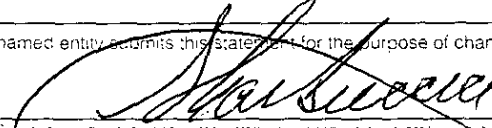
3. Mailing Address
15340 SW 106 TERR
 Suite, Apt. #, etc.
No. 814
 City & State
Miami, FL
 Zip
33196 Country
U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0904161
 Applied For
 Not Applicable
 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent
 Name
SOMMER CARBUCCIA
 Street Address (P.O. Box Number is Not Acceptable)
15340 SW 106 TERR
No. 814
 City
Miami, FL Zip Code
33196

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida
 SIGNATURE  (305) 752 53 75
 Signature typed or printed name of registered agent and title (if applicable) (NOTE: Registered Agent's signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See criteria on back) ☒

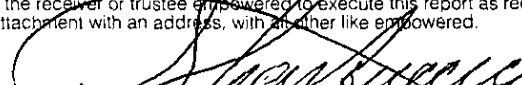
FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	☒ Change ☐ Addition
NAME	P, S, D
STREET ADDRESS	SOMMER CARBUCCIA
CITY - ST - ZIP	15340 SW 106 TERR
	Miami, FL 33196
TITLE	☒ Change ☐ Addition
NAME	V, D
STREET ADDRESS	MARTHA PENA
CITY - ST - ZIP	15340 SW 106 TERR
	Miami, FL 33196
TITLE	☒ Change ☐ Addition
NAME	D
STREET ADDRESS	JORGE BONDY
CITY - ST - ZIP	10365 W SAMPLE RD
	CORAL SPRINGS, FL 33065
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
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 true 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 attachment with an address, with an other like empowered.

SIGNATURE:  4/26/00 (305) 752 53 75
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR C Date Daytime Phone #

CR2E034 (9/99)