2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 799000030796

FUTURO 2000 TRAVEL, INC.

FILED May 21, 2001 8:00 am Secretary of State 05-21-2001 90032 003 ***150.00

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Principal Pla	ace of Busines	38	Mailing Address	<u> </u>					
109	9 S.W.	134 Ct.	•		ĺ				
		33184	SAME						
	,	- • •	· ·			_			
						6	58448		
2. Principal Place of Business 3. Mailing Address SAME SAME						•			
			SAME						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & Sta	oto .		Oits & Obsts					· · · · · · · · · · · · · · · · · · ·	
City & Si	ale ·		City & State			4. FEI Number 65 09	99 4643	-	pplied For
Zip		Country	Zip	Country	,				lot Applicable
		,				5. Certificate of Status Des	sired 🔲	\$8.75 Ad Fee Require	
- 6: Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent				
, .,	37 .	· ·			Name				
Avila, Nayda				-	Street Address (P.O. Box Number is Not Acceptable)				
1099 S.W. 134 Court Miami, Fl 33184					Courticuless (F.	C. LOX HUHILOR IS THUR ACCE	plauro)		
Miami	, FI	33184							
				<u> </u>	City			Zip Coc	40
							FL	. Lip Coc	
8. The abov	e named entit	y submits this statement for	the purpose of changing its i	registered	office or registered	dagent, or both, in the State	e of Florida.		
`	M	ai Almal	Nayda :	T A	:1.	President	01.101	. / 0.1	
SIGNATURE		or printed name of registered agent ar					04/29	3/01	
		or priviled marrie or regulatered agosti ar			gent signature required w	nen rainstaung)	DATE		
A Th. 1				C \$7053 2 553 0 4 46 4 4 5		2027			
	_	ble to satisfy its Intangible	FILE NOW!	! FEE 19	\$150.00	10. Election Campai	ion Financino	\$5.0	10 May 80
Tax filing	requirement a	nd elects to do so.	After MAY 1, 200	1 Fee wi	ll be \$550.00	10. Election Campai Trust Fund Contr		\$5.0 Adde	00 May Be d to Fees
Tax filing (See crite	_	nd elects to do so.	After MAY 1, 200 Make Check Payabl	1 Fee wi e to Depa	ll be \$550.00	Trust Fund Contr	ribution.	J Adde	d to Fees
Tax filing (See crite	requirement a eria on back)	ond elects to do so. OFFICERS AND D	After MAY 1, 200 Make Check Payabl DIRECTORS	1 Fee wi e to Depa 12.	ll be \$550.00		ribution.	J Adde	d to Fees .
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Tax filing (See crite 11. TITLE NAME	Avila 1099 Miami	OFFICERS AND C Nayda 5W. 134 Ct F1 33184	After MAY 1, 200 Make Check Payabl DRECTORS Delete Pres	1 Fee will e to Depa 12. IIILE NAME	Il be \$550.00 () artment of State	Trust Fund Contr	ribution.	J Adde	d to Fees .
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I hereby certify that the information supplied with this filling 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 eath; 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 all other like empowered.

SIGNATURE:

STREET ADDRESS

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/29/01

X207 305-573-4200∷

Change

☐ Addition