

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT #** P99000032085

1. Entity Name

COLIBRI SELECTIONS, INC.

Principal Place of Business

Mailing Address

1820 CHUCUNANTAH RD.  
MIAMI, FL. 33133P.O. BOX 453903  
MIAMI, FL. 33245

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

65-0944710

Applied For

Not Applicable

5. Certificate of Status Desired

XX

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MUNIZ, ANTONIO  
1820 CHUCUNANTAH RD.  
MIAMI, FL. 33133

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent 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 \$350.00**  
**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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PRESIDENT  
MUNIZ, ANTONIO  
1820 CHUCUNANTAH RD.  
MIAMI, FL. 33133☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
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CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/1/00

Date

Daytime Phone #

FILED

00 OCT 13 AM 9:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CR2E034 (9/99)

Attachment # P99000032085  
130105976

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COLIBRI Selections, Inc P. O. Box 453903 Miami, Florida 33245 (305) 285-4321  
Fax: (305) 285-3027 DelColibri@aol.com

JUNE 27, 2000

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
P.O. BOX 6327  
TALLAHASSEE, FL. 32314

RE: DOCUMENT # P99000032085

TO WHOM IT MAY CONCERN:

REGARDING INFORMATION RECEIVED OVER THE TELEPHONE FROM  
YOUR DEPARTMENT, WE ARE ENCLOSING REPLACEMENT CHECK  
NO. 1166 IN THE SUM OF \$158.75 TO REPLACE ORIGINAL CHECK NO.  
1078 MAILED OUT APRIL 18<sup>TH</sup>, FOR WHICH YOU SHOW NO RECORD IN  
YOUR FILES AND OUR BANK SHOWS IT STILL OUTSTANDING.

PLEASE NOTE THAT NO CHANGES HAVE TAKEN PLACE AND YOUR  
RECORDS SHOULD REFLECT ANTONIO MUNIZ AS THE ONLY  
OFFICER FOR THIS CORPORATION.

SHOULD YOU REQUIRE FURTHER INFORMATION, PLEASE DO NOT  
HESITATE TO CONTACT US AT (305) 285-4321.

YOUR PROMPT ATTENTION TO THIS MATTER IS APPRECIATED.

SINCERELY,

ANTONIO MUNIZ  
PRESIDENT

AM/ij

ENCLOSURES