

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P99000037784**

1. Entity Name

INTERNATIONAL VISION COLLECTION, INC.

Principal Place of Business

765 NE 174 ST
MIAMI BCH FL 33162

Mailing Address

765 NE 174 ST
MIAMI BCH FL 33162

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0927513

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PACHECO, ELCIO
765 NE 174TH ST
MIAMI BCH FL 33162

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00**
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PACHECO, ELCIO 765 N.E. 174TH STREET NORTH MIAMI BEACH FL 33162 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COSTA, PEDRO N 765 N.E. 174TH STREET NORTH MIAMI BEACH FL 33162 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE 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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ELCIO PACHECO

Date

Daytime Phone #

FILED
Jul 30, 2002 8:00 am
Secretary of State

05-27-2002 90321 013 ***150.00



CR2E034 (4/02)

Attachment # 40073

INTERNATIONAL VISION COLLECTION, INC.
765 NE. 174TH ST. PH. 305-690-5854
NORTH MIAMI BEACH, FL 33162

864388

452

HP9900003784

PAY
THE
ORDER OF

DATE 04/30/02

63-8413/2670

DEPARTMENT OF STATE

ONE HUNDRED FIFTY ONLY

\$ 150



Washington Mutual

Washington Mutual Bank, FA
North Miami Beach/Skyline Financial Center 1750
18425 NE. 19th Avenue 1-800-788-7000
North Miami Beach, FL 33179 24 hour Customer Service

FOR

899000637784

DOLLARS



⑈001452⑈ ⑆267084131⑆374⑈396368⑈4⑈

⑈0000015000⑈

WE ALREADY PAID IN TIME

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P990000037784**
 INTERNATIONAL VISION COLLECTION, INC.

765 NE 174 ST
 MIAMI BCH FL 33162

765 NE 174 ST
 MIAMI BCH FL 33162

*Attachment
 40073*



DO NOT WRITE IN THESE SPACES

3. Mailing Address

4. FEI Number **65-0927513**

Approved For
 Exp. Date

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

PACHECO, ELCIO
 765 NE 174TH ST
 MIAMI BCH FL 33162

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

FL 33162

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

\$5.00 May Be
 Added to Fees

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

D
 PACHECO, ELCIO
 765 N.E. 174TH STREET
 NORTH MIAMI BEACH FL 33162

D
 PAULO A. MACHADO
 765 NE 174 STREET-NB FL 33162

D
 COSTA, PEDRO N
 765 N.E. 174TH STREET
 NORTH MIAMI BEACH FL 33162

D
 VLADimir J. GATTI
 765 NE 174 STREET NB FL 33162

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR