

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 27, 2000 08:00 AM**  
**Secretary of State****DOCUMENT # P99000046041**

1. Entity Name

**FUTURES INTERNATIONAL & MANAGEMENT, INC.**

Principal Place of Business

**16405 SW 73RD LANE****MIAMI**  
**33193****FL**

Mailing Address

**16405 SW 73RD LANE****MIAMI**  
**33193****FL**

2. Principal Place of Business

**16405 SW 73RD LANE**

3. Mailing Address

**P.O. BOX 833184**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City &amp; State

**MIAMI****FL**

City &amp; State

**MIAMI****FL**

4. FEI Number

**65-0924935**

Applied For

Not Applicable

Zip

**33193**

Country

**US**

Zip

**33283**

Country

**US**

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

**CONTRERAS PAULA AESQ.**  
**7000 SW 97TH AVENUE**  
**SUITE 209**  
**MIAMI**  
**33173** **US** **FL**

Name

**CONTRERAS PAUL AESQ.**

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

**7000 SW 97TH AVENUE****SUITE 209**

City

**MIAMI****FL**

Zip Code

**33173**

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 **PAUL A. CONTRERAS, ESQ.**

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

(NOTE: Registered Agent signature required when reinstating)

**04/27/2000**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VD** ☐ Delete  
NAME **PARRILLA JULIAN A**  
STREET ADDRESS **16405 SW 73RD LANE**  
CITY-ST-ZIP **MIAMI FL 33193**TITLE **VD** ☒ Change ☐ Addition  
NAME **PARRILLA JULIAN A**  
STREET ADDRESS **16405 SW 73RD LANE**  
CITY-ST-ZIP **MIAMI FL 33193**TITLE **PSTD** ☐ Delete  
NAME **FARINAS BRENDA G**  
STREET ADDRESS **16405 SW 73RD LANE**  
CITY-ST-ZIP **MIAMI FL 33193**TITLE **PSTD** ☒ Change ☐ Addition  
NAME **FARINAS BRENDA G**  
STREET ADDRESS **16405 SW 73RD LANE**  
CITY-ST-ZIP **MIAMI FL 33193**TITLE ☐ Delete  
NAME  
STREET ADDRESS  
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CITY-ST-ZIPTITLE ☐ 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 all other like empowered.

SIGNATURE: **PAUL A. CONTRERAS, ESQ.**DATE: **04/27/2000**