2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9900048649 1. Entity Name LATIN NODE, INC.						FILED OD JUL 12 PM I2: 28 SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business Mailing Address						IALLAHASSI	:E. FLORIDA	4	
7232 N.W. 31ST MIAMI FL 33122		7232 N.W. 31ST ST. MIAMI FL 33122-1216							
2. Principal Pl	lace of Business Same as above	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN TH	HIS SPACE		
City & State		City & State			4.	FEI Number 65-0927797		oplied For ot Applicable	
Zip Country		Zip	p Country		5.	Certificate of Status Desired	\$8.75 Add		
	6. Name and Address of Current F	legistered Agent		Γ	7.	Name and Address of New Register			
2655	Man, Lenard H Le Jeune Rd., Penthouse I-d Al Gables Fl 33134		Street C/0		ess (P.O. E F 150 • Biso	ation Company of Miami s (P.O. Box Number is Not Acceptable) 1500 Miami Cemter Biscayne Blvd. FL Zip Code 33131			
Tax filing re	Signature, typled or printed name of registered agent an orration is eligible to satisfy its Intangible sequirement and elects to do so. ia on back)	itle if applicable. (NOTE: Registered Agent signature required FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State			00	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees			
11.	OFFICERS AND D		12.	- partiment of		DDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	J	Delete	TITL NAM STRE	i i	Presi Steph 7232	ident/Director nan Nathusius NW 31 Street i, FL 33122	☐ Change	₩Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ha	Delete		L.	Vice Jorge 7232	President/Director Granados NW 31 Street FI 33122	Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		- (333710	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	☐ Addition	
indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empor or on an attachment with an address, w	true and accurate and that n	ny sìgna as requi	ture shall have	the same	legal effect as if made under oath; the	at I am an officer	or director	

July 11, 2000 (305) 358-6300

THE OR PRINTED NAME OF SIGNING OFFICER OR DIREMPORT Lene Bramer, Secretary

Daylime Phone #