

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000055203

1. Entity Name

LIFE, SCIENCE AND INDUSTRY, INC.

FILED
Jan 20, 2000 8:00 am
Secretary of State

01-20-2000 90228 048 ***150.00

Principal Place of Business

Mailing Address

6370 S.W. 139 AVE.
MIAMI FL 33183 *wrong.*

6370 S.W. 139 AVE.
MIAMI FL 33183-1176

↙ ↘ change

2. Principal Place of Business

13780 S.W. 56th ST Suite 206

3. Mailing Address

13780 S.W. 56th St

Suite, Apt. #, etc.

206

Suite, Apt. #, etc.

206

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33175

Country

U.S.

Zip

33175

Country

U.S.

4. FEI Number

65-0934660

Applied For

Not Applicable

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

MEDINA DORANTE, CAROLS (spelled wrong).

6370 S.W. 139 AVE.

MIAMI FL 33183

Name

MEDINA DORANTE, CARLOS

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

13780 S.W. 56th ST. Suite # 206

City

MIAMI,

FL

Zip Code

33175

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 \$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 P ☒ Delete
NAME MEDINA-DORANTE, CAROLS
STREET ADDRESS 6370 S.W. 139 AVE.
CITY-ST-ZIP MIAMI FL 33183

TITLE P ☒ Change ☐ Addition
NAME MEDINA-DORANTE, CARLOS
STREET ADDRESS 13780 S.W. 56th ST. SUITE 206
CITY-ST-ZIP MIAMI, FLORIDA 33175

TITLE V ☒ Delete
NAME CARABALLO, BECKY
STREET ADDRESS 6370 S.W. 139 AVE.
CITY-ST-ZIP MIAMI FL 33183

TITLE V ☒ Change ☐ Addition
NAME CARABALLO BECKY
STREET ADDRESS 13780 S.W. 56th ST. SUITE 206
CITY-ST-ZIP MIAMI, FLORIDA 33175

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ 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:

Becky Caraballo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-00

Date

Daytime Phone #

CR2E034 (9/99)