

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Apr 26, 2001 8:00 am**  
**Secretary of State**

04-26-2001 90120 004 \*\*\*150.00

DOCUMENT # P99000056024

1. Entity Name

**BRAZILIAN POINT INC.**

Principal Place of Business

Mailing Address

**840 E OAKLAND PARK BLVD. #117**  
**FT. LAUDERDALE, FL 33304**

2. Principal Place of Business

3. Mailing Address

**3047 ARTHUR ST.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**HOLLYWOOD, FL**

4. FEI Number

**65-0928421**

Applied For

Not Applicable

Zip

Country

Zip

**33021**

Country

5. Certificate of Status Desired ☐

**\$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

Name

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

City

**FL**

Zip Code

**RONALDO F. BATISTA**  
**3047 ARTHUR ST**  
**HOLLYWOOD, FL 33021**

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, 2001 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 ☐ Delete  
NAME **D**  
STREET ADDRESS **RONALDO F. BATISTA**  
CITY-ST-ZIP **3047 ARTHUR ST.**  
**HOLLYWOOD, FL 33021**

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

TITLE ☐ Delete  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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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:

**Ronald F. Batista**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**06.20.2001 954.630.8840**

Date

Daytime Phone #

CR2E034 (11/00)