

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000060353

1. Entity Name

BOLTEN INTERNATIONAL, INC.

FILED

May 02, 2000 8:00 am
Secretary of State

05-02-2000 90052 005 ***150.00

Principal Place of Business

Mailing Address

1112 WESTON RD., STE. 218
WESTON FL 33326-1915

1112 WESTON RD., STE. 218
WESTON FL 33326-1915

2. Principal Place of Business

3. Mailing Address

4240 Mahogany Ridge Dr
Suite, Apt. #, etc.

4240 Mahogany Ridge Dr
Suite, Apt. #, etc.

City & State
Weston, FL

City & State
Weston, FL

4. FEI Number
65-0948869

Applied For
Not Applicable

Zip
33331

Country
Broward

Zip
33331

Country
Broward

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

CASTANEDA, ANGELA
1112 WESTON RD., STE. 218
WESTON FL 33326-1915

Name
Castaneda, Angela
Street Address (P.O. Box Number is Not Acceptable)
4240 Mahogany Ridge Dr
City Weston FL Zip Code 33331

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 NAME STREET ADDRESS CITY-ST-ZIP | D GUTIERREZ RAMIREZ, GERMAN E 1112 WESTON RD., STE. 218 WESTON FL 33326-1915 | <input type="checkbox"/> Delete |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4240 Mahogany Ridge Dr Weston, FL 33331 |
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/00 (954)385-8300
Date Daytime Phone #

CR2E034 (9/99)