

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000063779

1. Entity Name

AMDX CORPORATION



Principal Place of Business

4350 N.W. 107TH AVE. #305  
MIAMI FL 33178

Mailing Address

4350 N.W. 107TH AVE. #305  
MIAMI FL 33178

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0935018

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

MARTINEZ, JORGE E  
4350 N.W. 107TH AVE. #305  
MIAMI FL 33178

Name

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

City

FL

Zip Code

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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 PVST ☐ Delete  
NAME ROJAS, ADELFA  
STREET ADDRESS 4350 N.W. 107TH AVE. #305  
CITY-ST-ZIP MIAMI FL 33178

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

TITLE D ☐ Delete  
NAME ROJAS, ADELFA  
STREET ADDRESS 4350 N.W. 107TH AVE. #305  
CITY-ST-ZIP MIAMI FL 33178

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition  
NAME JORGE MARTINEZ  
STREET ADDRESS 4350 N.W. 107 AVE. #305  
CITY-ST-ZIP MIAMI, FL. 33178

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JORGE MARTINEZ

Date

Daytime Phone #

FILED  
Sep 13, 2000 8:00 am  
Secretary of State

09-13-2000 90016 029 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (5/00)

Attachment # P99000063714

BD106222



Amdx Corporation

October/15/2000

## NOTE

Enclosed is the UBR 2000 for AMDX Corporation.

This is the second submission of this form since the first one has been misplaced. We found this out by calling the DIVISION OF CORPORATIONS upon receiving a second notice to submit the UBR.

I Spoke with Shawn (850) 487-6056, the operator at the Annual Reports section of the DIVISION OF CORPORATIONS - CORPORATIONS and LLCs.

Shawn instructed to submit the original fee of \$150, along with this attached note. In the event that the previous UBR and check are found, The new payment will not be charged.

Please process accordingly. Thank you.

Jorge E. Martinez  
Director  
jorge@amdx.com

