

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91905 040 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000064323

1. Entity Name
MOUNT HOLDINGS INC.



Principal Place of Business
2600 DOUGLAS RD
PH 6
CORAL GABLES, FL 33134

Mailing Address
2600 DOUGLAS RD
PH 6
CORAL GABLES, FL 33134

2. Principal Place of Business
2121 Ponce de Leon Blvd

3. Mailing Address
2121 Ponce de Leon Blvd

Suite, Apt. #, etc.
330

Suite, Apt. #, etc.
330

☒ CHECK HERE IF MAKING CHANGES

City & State
Coral Gables, Florida

City & State
Coral Gables, Florida

4. FEI Number
65-1014481

Applied For
☐ Not Applicable

Zip
33134

Country
USA

Zip
33134

Country
USA

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

ORTIZ, MICHAEL
2600 DOUGLAS RD.
PH 6
CORAL GABLES, FL 33134

Name
Michael Ortiz, P.A.
Street Address (P.O. Box Number is Not Acceptable)
2121 Ponce de Leon Blvd
Ste. 330
City
Coral Gables **FL** Zip Code
33134

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
DS ☐ Delete
NAME
ORTIZ, MICHAEL
STREET ADDRESS
2600 DOUGLAS RD., PH 6
CITY-ST-ZIP
CORAL GABLES, FL 33134

TITLE
☐ Delete
NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE
☐ Delete
NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE
☐ Delete
NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE
☐ Delete
NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE
☐ Delete
NAME

STREET ADDRESS

CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
DS ☒ Change ☐ Addition
NAME
Michael Ortiz
STREET ADDRESS
2121 Ponce de Leon Blvd, Ste 330
CITY-ST-ZIP
Coral Gables, FL 33134

TITLE
☐ Change ☐ Addition
NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE
☐ Change ☐ Addition
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STREET ADDRESS

CITY-ST-ZIP

TITLE
☐ Change ☐ Addition
NAME

STREET ADDRESS

CITY-ST-ZIP

12. 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 10 or Block 11 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

Date

Daytime Phone #

4/30/03 305 476 5270

CR2E034 (10/02)