

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

DOCUMENT # P99000066514

1. Entity Name

MOTHERSYSTEM INTERNATIONAL, INC.



FILED

03 NOV 25 PM 1:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

REINSTATEMENT

00-03 Wap

2. Principal Place of Business
3900 NW 79 AVE.

Suite, Apt. #, etc.
STE: 632

City & State
MIAMI, FL

Zip
33166

Country

3. Mailing Address
3900 NW 79 AVE.

Suite, Apt. #, etc.
STE: 632

City & State
MIAMI, FL

Zip
33166

Country

4. FEI Number
65-0936836

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
HENRY W. BETANCUR

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

3900 NW 79 AVE. STE: 632

City
MIAMI

FL

Zip Code
33166

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]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY-ST-ZIP
(P/D) HENRY W. BETANCUR
3900 NW 79 AVE. STE: 632
MIAMI, FL 33166

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

700025526057
12/16/03-01034-022 *\$600.00

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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-24-03

Date

Daytime Phone #

CR20348 (12/02)

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MOTHER SYSTEM INTERNATIONAL MOTHER SYSTEM INTERNATIONAL, INC

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS I AM SENDING THIS UBR FORM ALONG WITH A CHECK TO PROPERLY UPDATE MY CORPORATION. DUE TO A CHANGE OF ADDRESS I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE REGARDING THE 2000 UNIFORM BUSINESS REPORT.

PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT MY CORPORATION IN ITS ACTIVE STATUS AND TO WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER.

CORDIALLY



HENRY W. BETANCUR
PRESIDENT