

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000071257

1. Entity Name  
YUPI INTERNET INTERNATIONAL, INC.

Principal Place of Business  
605 LINCOLN RD., STE. 430  
MIAMI BEACH FL 33131

Mailing Address  
605 LINCOLN RD., STE. 430  
MIAMI BEACH FL 33131

FILED

May 11, 2001 8:00 am  
Secretary of State

05-11-2001 90467 013 \*\*\*150.00

00000100



DO NOT WRITE IN THIS SPACE

|  |                |  |                |
|--|----------------|--|----------------|
| 2. Principal Place of Business<br>1688 Meridian Ave. |                | 3. Mailing Address<br>1688 Meridian Ave. |                |
| Suite, Apt. #, etc.<br>10th Floor                    |                | Suite, Apt. #, etc.<br>10th Floor        |                |
| City & State<br>Miami Beach, FL                      |                | City & State<br>Miami Beach              |                |
| Zip<br>33139   | Country<br>USA | Zip<br>33139                             | Country<br>USA |

|  |  |
|--|--|
| 4. FEI Number<br>65-0961191  | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |  |

6. Name and Address of Current Registered Agent

BENTATA, ARIEL  
605 LINCOLN RD., STE. 430  
MIAMI BEACH FL 33131

7. Name and Address of New Registered Agent

Name  
PRIO, MARIA ELENA  
Street Address (P.O. Box Number is Not Acceptable)  
1688 Meridian Avenue, 10th Floor  
City  
Miami Beach FL Zip Code  
33139

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

|   |  |   |
|---|--|---|
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/> | FILE NOW!!! FEE IS \$150.00<br>After MAY 1, 2001 Fee will be \$550.00<br>Make Check Payable to Department of State | 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|--|---|

| 11. OFFICERS AND DIRECTORS                     |   | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |   |
|--|---|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | P<br>COEN, OSCAR<br>1688 MERIDIAN AVE. 10TH FLOOR<br>MIAMI FL 33139 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | VPS<br>BENTATA, ARIEL<br>100 S.E. 2nd, Street, Suite 3850<br>Miami Beach, FL 33131 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | VPD<br>CRUZ, CAMILO<br>1688 Meridian Ave. 10th Floor<br>Miami Beach, FL 33139 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | VPD<br>CARDONA, CARLOS<br>1688 Meridian Ave. 10th Floor<br>Miami Beach, FL 33139 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | VPDLES, GUSTAVO<br>MORLES, GUSTAVO<br>1688 Meridian Ave. 10th Floor<br>Miami Beach, FL 33139 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |

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: Maria Elena Prio Maria Elena Prio 4/27/01 (305)604-0366  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)