

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

FILED
Jun 16, 2002 8:00 am
Secretary of State

06-16-2002 90692 039 ***150.00

DOCUMENT # **P99000074474**

1. Entity Name

Intercontinental Purchasing Agency, Inc.

DO NOT WRITE IN THIS SPACE

869006

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5557 NW 72nd AVE.

Suite, Apt. #, etc.

N/A

3. Mailing Address

5557 NW 72nd AVE.

Suite, Apt. #, etc.

N/A

City & State

MIAMI Florida

Zip

33166

Country

Dade

City & State

MIAMI Florida

Zip

33166

Country

DADE

4. FEI Number

65-0945085

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name **CHANTALE BARBOT**

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

8840 NW 32nd ST.

City

Coral Springs

FL

Zip Code

33065

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 **CHANTALE BARBOT President**

Signature, typed or printed name of registered agent and (if applicable)

(NOTE: Registered Agent signature required when resigning)

DATE

06/07/02

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**- P
- CHANTALE BARBOT
8840 NW 32nd AVE.
CORAL SPRINGS FL. 33065**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHANTALE BARBOT

06/07/02

Date

(354) 257-3580

Daytime Phone #

CR2034B (12/01)

Attachment

INTERCONTINENTAL PURCHASING AGENCY, INC.
5557 NW 72ND. AVE.
MIAMI, FLORIDA 33166
TEL- (305) 805-9455
FAX- (305) 805-9454

06/07/02


869006
#P99 000074474

To Whom It May Concern:

I am respectfully requesting a waiver from the penalty of filing late. Apparently I never received the UBR in the mail and with the daily routine of running a small business, I neglected to make inquires until this date.

Attached you will find a completed UBR along with a bank certified check for the sum of \$150.00. Thank you for your time and understanding on this matter.

Respectfully submitting,


Chantale Barbot - President.