

2000 UNIFORM BUSINESS REPORT (UBR)

4/24

FILED
Jun 06, 2000 8:00 am
Secretary of State

04-25-2000 90101 002 ***150.00

DOCUMENT # P99000079446

1. Entity Name
EZ PHONE SERVICES CORPORATION

Principal Place of Business 4440 NW 73 AVE., BUILDING 2301, UNIT 120 MIAMI FL 33166	Mailing Address 4440 NW 73 AVE., BUILDING 2301, UNIT 120 MIAMI FL 33166-6437
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2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip
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DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0945959	Applied For <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

7. Name and Address of New Registered Agent

CRESPO, ARMANDO S
~~4440 NW 73 AVE., BUILDING 2301, UNIT 120~~
~~MIAMI FL 33166~~
1643 BRICKELL AVE - SUITE 1702
MIAMI, FL 33129

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 _____ (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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

PCEO <input type="checkbox"/> Delete CRESPO, ARMANDO S 4440 NW 73 AVE., BUILDING 2301, UNIT 120 MIAMI FL 33166	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP
D <input type="checkbox"/> Delete CRESPO, ARMANDO S 4440 NW 73 AVE., BUILDING 2301, UNIT 120 MIAMI FL 33166	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP
V <input type="checkbox"/> Delete ALVAREZ, RODRIGO 4440 NW 73 AVE., BUILDING 2301, UNIT 120 MIAMI FL 33166	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP
D <input type="checkbox"/> Delete LLERENA, PATRICIO 4440 NW 73 AVE., BUILDING 2301, UNIT 120 MIAMI FL 33166	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP
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<input type="checkbox"/> Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE 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: **APRIL 10/2000 (305) 858 4633**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)