

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2002 8:00 am
Secretary of State

09-10-2002 90210 043 ***150.00

DOCUMENT # P99000087578

1. Entity Name
MIND OPENING CORPORATION

Principal Place of Business

1800 NE 118 STREET, SUITE 905
 MIAMI FL 33138

Mailing Address

1800 NE 118 STREET, SUITE 905
 MIAMI FL 33138

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0952100

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MARDER, MARK A
9400 SOUTH DADELAND BLVD., PH 5
MIAMI FL 33156

7. Name and Address of New Registered Agent

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

SIGNATURE

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

(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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

TITLE **P** ☐ Delete
 NAME **KAMRAT, JANE**
 STREET ADDRESS **1800 NE 114TH STREET APT 905**
 CITY-ST-ZIP **MIAMI FL 33181**

TITLE **VP** ☐ Delete
 NAME **KAMRAT, MORRIS**
 STREET ADDRESS **1800 NE 114TH STREET APT 905**
 CITY-ST-ZIP **MIAMI FL 33181**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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TITLE ☐ Change ☐ Addition
 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:

McDASILE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

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978608
#p99000087578

MIND OPENING CORPORATION

1800 N.E. 114th street, Suite 905 Miami, FL 33138

September 5, 2002

**Department Of State
Division OF Corporations
Uniform Business Report Filings
PO BOX 1500
Tallahssee, FL 32302-1500**

Dear Sir or Madam,

We spoke to your office this morning regarding the filing fees. We had never received a letter from your office regarding the \$150.00 filing fee. We are not exactly clear as to our obligation for these fees in the future. Are we to expect a letter from you prior to May 1, or do we file this fee on our own. We would like to not have to go through this process in the future. Please except this \$150.00

Thank you


M. David Kamrat
President