

# 2000 UNIFORM BUSINESS REPORT (UBR)

8/

DOCUMENT # P9900008847

**FILED**  
**Aug 21, 2000 8:00 am**  
**Secretary of State**

08-08-2000 90013 021 \*\*\*150.00

1. Entity Name

Company of Marketing Pass International, I

Principal Place of Business

Mailing Address

19390 Collins Avenue, Suite 1618-A  
Sunny Isles, FL 33160

2. Principal Place of Business

3. Mailing Address

19390 Collins Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.  
1618-A

City & State

Sunny Isles FL

Zip

33160

Country  
USA

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

650960583

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

P.J. Kessler  
19390 Collins Ave, Apt 1618-A  
Sunny Isles, FL 33160

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

Signature of individual 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 requirements 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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
President  
Sonia Monoz  
19390 Collins Ave # 1618-A  
Sunny Isles, FL 33160

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Vice President  
Joquin Kessler  
19390 Collins Ave # 1618-A  
Sunny Isles, FL 33160

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Secretary-Treasurer  
Elsa Kessler  
19390 Collins Ave # 1618-A  
Sunny Isles, FL 33160

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
19390 Collins Ave # 1618-A  
Sunny Isles, FL 33160

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CITY-ST-ZIP

☐ Change ☐ 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: X Kessler E

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)



COMPASS INTERNATIONAL, INC.

SALES, MARKETING & PUBLIC RELATIONS

Attachment  
08/01/00 08547  
309308

UNIFORM BUSINESS REPORT  
Division of Corporations  
P.O.Box 1500  
Tallahassee, FL 32302-1500

Ref.: Company of Marketing Pass International, Inc.

August 01, 2000

Dear Sir, Madame,

Please find attached check for the amount of \$150.00

Please note that we did not receive the report until last month and we were on a business trip until last Monday.

Please update your records accordingly.

We thank you for your assistance.

Best regards,

  
Sonia Munoz

C.C. File