

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000089959

1. Entity Name

FUTURA 2000 INDUSTRIÉS, CORP.

**FILED**  
**Sep 15, 2000 8:00 am**  
**Secretary of State**

05-17-2000 90954 016 \*\*\*150.00

09-15-2000 90004 036 \*\*\*550.00

AU077915



DO NOT WRITE IN THIS SPACE

Principal Place of Business

10860 NW 27TH STREET  
 MIAMI FL 33172  
 L3

Mailing Address

10860 NW 27TH STREET  
 MIAMI FL 33172  
 L3

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

EIN-65-0953708

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

LAGE, GONZALO R  
 10860 NW 27TH STREET  
 MIAMI FL 33172

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.

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, 2000 Min. 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: President  
 NAME: Gonzalo R. Lage  
 STREET ADDRESS: 10860 NW 27 St.  
 CITY-ST-ZIP: Miami, FL 33172 ☐ Delete

TITLE: Vice-President  
 NAME: Elena Lage  
 STREET ADDRESS: 10860 NW 27 St  
 CITY-ST-ZIP: Miami, FL 33172 ☐ Delete

TITLE: Vice-President  
 NAME: Angelina Lage  
 STREET ADDRESS: 10860 NW 27 St  
 CITY-ST-ZIP: Miami, FL 33172 ☐ Delete

TITLE: Secretary  
 NAME: Gonzalo M. Lage  
 STREET ADDRESS: 10860 NW 27 St  
 CITY-ST-ZIP: Miami, FL 33172 ☐ Delete

TITLE: ☐ Delete  
 NAME: ☐ Delete  
 STREET ADDRESS: ☐ Delete  
 CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete  
 NAME: ☐ Delete  
 STREET ADDRESS: ☐ Delete  
 CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE: ☐ Change ☐ Addition  
 NAME: ☐ Change ☐ Addition  
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TITLE: ☐ Change ☐ Addition  
 NAME: ☐ Change ☐ Addition  
 STREET ADDRESS: ☐ Change ☐ Addition  
 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #