

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000091055

1. Entity Name

GRUPO VISAO DO SAMBA, CORP.



FILED
Mar 21, 2001 8:00 am
Secretary of State

03-21-2001 90046 036 ***150.00

A0035615

DO NOT WRITE IN THIS SPACE

Principal Place of Business
708 S FEDERAL HWY #26
DEERFIELD BEACH FL 33441

Mailing Address
708 S FEDERAL HWY #26
DEERFIELD BEACH FL 33441

2. Principal Place of Business
111 ROYAL PARK DRIVE
Suite Apt. #, etc.
2-A
City & State
OAKLAND PARK, FL
Zip
33309 Country
USA

3. Mailing Address
111 ROYAL PARK DRIVE
Suite. Apt. #, etc.
2-A
City & State
OAKLAND PARK, FL
Zip
33309 Country
USA

4. FEI Number
65-0952097

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

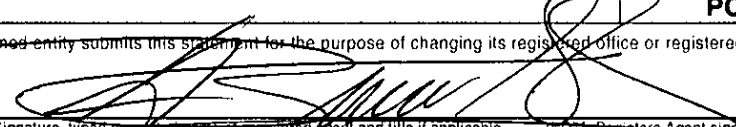
6. Name and Address of Current Registered Agent

DA CONCEICAO, GILSON
708 S FEDERAL HWY #26
DEERFIELD BEACH FL 33441

7. Name and Address of New Registered Agent

Name
TAX HOUSE CORPORATION
Street Address (P.O. Box Number is Not Acceptable)
3929 N. FEDERAL HWY
City
POMPANO BEACH, FL Zip Code
33064

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  **PRESIDENT** **03/15/01**
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 \$150.00
After MAY 1, 2001 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

TITLE
PTD ☐ Delete
NAME
DA CONCEICAO, GILSON
STREET ADDRESS
708 S FEDERAL HWY #26
CITY-ST-ZIP
DEERFIELD BEACH FL 33441

TITLE
PTD ☐ Delete
NAME
DA CONCEICAO, MARCELLE
STREET ADDRESS
708 S FEDERAL HWY #26
CITY-ST-ZIP
DEERFIELD BEACH FL 33441

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
PTD ☒ Change ☐ Addition
NAME
DA CONCEICAO, GILSON
STREET ADDRESS
111 ROYAL PARK DRIVE
CITY-ST-ZIP
OAKLAND PARK, FL 33309

TITLE
PTD ☒ Change ☐ Addition
NAME
DA CONCEICAO, MARCELLE
STREET ADDRESS
111 ROYAL PARK DRIVE
CITY-ST-ZIP
OAKLAND PARK, FL 33309

TITLE
☐ Change ☐ Addition
NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE
☐ Change ☐ Addition
NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE
☐ Change ☐ Addition
NAME

STREET ADDRESS

CITY-ST-ZIP

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 19.07(3)(1), 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 N changed or on an attachment with an address, with all other like empowered.

SIGNATURE:  **03/15/2001** (954) 717-4502
Signature and typed or printed name of signing officer or director Date Daytime Phone #