2000 UNIFORM BUSINESS REPORT (UBR)

of the corporation or the reciphanged, or on an attachme

SIGNATURE:

DOCUMENT # P99000092642 Aug 21, 2000 8:00 am Secretary of State CA-ZA, INC. 08-21-2000 90213 043 ***150.00 Principal Place of Business Mailing Address 2801 PONCE DE LEON BLVD. 2801 PONCE DE LEON BLVD. SUITE 220 SUITE 220 CORAL GABLES FL 33134 CORAL GABLES FL 33134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TERES A C. Zaitsev GONZALEZ, JORGE L Street Address (P.O. Box Number is Not Acceptable) 2801 PONCE DE LEON BLVD. SUITE 220 NW 85 Court CORAL GABLES FL 33134 ^z39%27 his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named entity a SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State . OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Change ☐ Addition TITLE □ Detete TITLE NAME ZAITSEV, TERESA NAME 44 NW 85 COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33126 ☐ Addition Delete Change ZAITSEV, DEMITRI V NAME STREET ADDRESS 44 NW 85 COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33126 ☐ Addition TITLE ☐ Detete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of trustee employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment off pagowaaup ow80015

August 13, 2000 ·

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Document # P99000092642

Dear Sirs:

As you can see from the enclosed UBR form, I have enclosed the amount of \$150 for the filing fee. We never received any documents stating that the deadline was in May and that is why we did not send the payment earlier. I have changed the registered agent because my agent told me that he did not receive any correspondence to this effect. Please accept my payment and hopefully this will not happen in the future.

Currently, our corporation has not even started and the FEI is applied for.

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11/10

Teresa C. Zaitsev

President

Sincerely,