

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000096160

1. Entity Name
MB BLUE WAY, INC.

Principal Place of Business
**200 S BISCAYNE BLVD., SUITE 2350
MIAMI, FL 33131**

Mailing Address
**200 S BISCAYNE BLVD., SUITE 2350
MIAMI, FL 33131**

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
65-0960409

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SLOTO, JAMES R ESQ
MISHAN, SLOTO, GREENBERG, & HELLINGER
200 S BISCAYNE BLVD #2350
MIAMI, FL 33131**

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's Signature Required unless otherwise indicated)

DATE

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	NAISTAT, ROBERTO	
STREET ADDRESS	200 S BISCAYNE BLVD STE 2000	
CITY-STATE-ZIP	MIAMI, FL 33131	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an affidavit, each at other time empowered.

SIGNATURE: 

SIGNATURE AND TITLE OF FILER OR FILER'S OFFICE OR DIRECTOR

Date

Daytime Phone #

716/6

FILED

03 JUN -5 AM 7:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10079745

000020569010
06/06/03--01066--002 **150.00



☐ CHECK HERE IF MAKING CHANGES

CRF0304 (10/02)



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 28, 2003

MB BLUE WAY, INC.
200 S BISCAYNE BLVD., SUITE 2350
MIAMI, FL 33131

SUBJECT: MB BLUE WAY, INC.
Ref. Number: P99000096160

We have received your document for MB BLUE WAY, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

THE WRITTEN AND NUMERIC PARTS OF THE CHECK MUST BE THE SAME.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers
Document Specialist

Letter Number: 603A00033445



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

April 26, 2003

**MB BLUE WAY, INC.
200 S BISCAYNE BLVD., SUITE 2350
MIAMI, FL 33131**

Subject: **MB BLUE WAY, INC.**

Reference Number: P99000096160

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please note the money amounts differ on the check. The numeric and written amounts must be the same. Please send a corrected check for the proper amount.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE
CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O.
BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF
THE DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the
Division of Corporations at (850) 488-9000.

/ES

ANNUAL REPORTS SECTION