

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000099372

1. Entity Name

FACT GROUP, INC.

FILED
May 05, 2000 8:00 am
Secretary of State

05-05-2000 90070 042 ***150.00

Principal Place of Business

1059 COLLINS AVENUE, SUITE 108
 MIAMI BEACH FL 33139

Mailing Address

1059 COLLINS AVENUE, SUITE 108
 MIAMI BEACH FL 33139-5036

2. Principal Place of Business

4907 SHERIDAN ST

3. Mailing Address

4907 SHERIDAN ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

HOLLYWOOD, FLORIDA

City & State

HOLLYWOOD, FLORIDA

4. FEI Number

65-0960988

Applied For

Not Applicable

Zip

33021

Country

U.S.A.

Zip

33021

Country

U.S.A.

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

ABRAMSON, EDWARD J
 7270 N.W. 12TH STREET
 SUITE 580
 MIAMI FL 33126

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 \$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 PD
 NAME IBANEZ, GUSTAVO T
 STREET ADDRESS 1059 COLLINS AVENUE, SUITE 108
 CITY-ST-ZIP MIAMI BEACH FL 33139 ☐ Delete

TITLE PD
 NAME IBANEZ, GUSTAVO P.
 STREET ADDRESS 4907 SHERIDAN ST
 CITY-ST-ZIP HOLLYWOOD, FL 33021 ☒ Change ☐ Addition

TITLE VD
 NAME CRESPO, JAIME D
 STREET ADDRESS 1059 COLLINS AVENUE, SUITE 108
 CITY-ST-ZIP MIAMI BEACH FL 33139 ☐ Delete

TITLE VD
 NAME CRESPI, JAIME D.
 STREET ADDRESS 4907 SHERIDAN ST
 CITY-ST-ZIP HOLLYWOOD, FL 33021 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 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 same address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GUSTAVO P. IBANEZ

Date

4/20/00

Daytime Phone #

(954) 981-0555

CR2E034 (9/99)