

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 04, 2001 8:00 am  
Secretary of State

04-04-2001 90021 030 \*\*\*150.00

DOCUMENT # P99000100993

1. Entity Name

LOCIN COMMUNICATIONS, CORP.

Principal Place of Business

Mailing Address

8725 NW 18 TERR #402

8725 NW 18 TERR #402

MIAMI, FL 33172

MIAMI, FL 33172

2. Principal Place of Business

3. Mailing Address

9837 SW 184 ST

9837 SW 184 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

MIAMI, FL

MIAMI, FL

Zip

Country

Zip

Country

33157

USA

33157

USA

4. FEI Number

65-0962298

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

INTRASTATE REGISTERED AGENT CORPORATION  
701 BRICKELL AVE ST 3000  
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.

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
MICHAEL S. FLETCHER  
14853 SW 171 TERR  
MIAMI, FL 33187

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
MERRITT FLETCHER  
14853 SW 171 TERR  
MIAMI, FL 33187

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SIT  
SEAN JACKSON FLETCHER  
14853 SW 171 TERR  
MIAMI, FL 33187

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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 an address with all other like empowered.

SIGNATURE:

Michael S. Fletcher

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/01

Date

Daytime Phone #

CR2E034 (11/00)