

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000111626

1. Entity Name

ST. AUGUSTINE INTERNATIONAL, INC.

FILED

Feb 07, 2001 8:00 am
Secretary of State

02-07-2001 90137 011 ***158.75

Principal Place of Business

2601 S. BAYSHORE DRIVE STE 1250
MIAMI FL 33133

Mailing Address

2601 S. BAYSHORE DRIVE STE 1250
MIAMI FL 33133

2. Principal Place of Business

347 Washington Ave.
Suite, Apt. #, etc.

3. Mailing Address

347 Washington Ave.
Suite, Apt. #, etc.

City & State

miami Beach, FL

City & State

miami Beach, FL

Zip

33139

Country

USA

Zip

33139

Country

USA

4. FEI Number

65-0971369

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

ROBERT A. FREEMAN, P.A.
2601 S. BAYSHORE DRIVE STE 1250
MIAMI FL 33133

Name Wanda Pistella, P.A.
Street Address (P.O. Box Number is Not Acceptable)
3001 Ponce de Leon Blvd.
Suite 262
City Coral Gables, FL 33134

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

Wanda Pistella, Wanda Pistella

1/25/01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP
NAME CANALE, FERNANDO
STREET ADDRESS 2601 S. BAYSHORE DRIVE STE 1250
CITY-ST-ZIP MIAMI FL 33133 ☐ Delete

TITLE P/D/S
NAME Fernando Canale
STREET ADDRESS 347 Washington Ave
CITY-ST-ZIP miami Beach, FL 33139 ☒ Change ☐ Addition

TITLE VP
NAME ROBERTS, ROBERTO
STREET ADDRESS 2601 S. BAYSHORE DR., #1250
CITY-ST-ZIP MIAMI FL 33133 ☐ Delete

TITLE VP/D
NAME Roberto A.F. Roberts
STREET ADDRESS 2600 Douglas Road #905
CITY-ST-ZIP Coral Gables, FL 33134 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Delete

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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 an address, with all other like empowered.

SIGNATURE:

Fernando Canale

1/26/01

305-532-0570

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E034 (10/00)