

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S50790

1. Entity Name

V & T ORCHIDS, INC.

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90960 027 ***150.00

Principal Place of Business

7464 SOUTHWEST 48TH STREET, SUITE 24
MIAMI FL 33155

Mailing Address

7464 SOUTHWEST 48TH STREET, SUITE 24
MIAMI FL 33155-4469

2. Principal Place of Business

2200 N.W. 10th AVE

3. Mailing Address

2200 N.W. 10th AVE

Suite, Apt. #, etc.

SUITE #1

Suite, Apt. #, etc.

SUITE #1

City & State

MIAMI FL

City & State

MIAMI FL 33172

Zip

33172

Country

USA

Zip

33172

Country

USA

4. FEI Number

65-0258376

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HALELAMEN, VERAPONG
7464 SOUTHWEST 48TH STREET
SUITE 24
MIAMI FL 33155

7. Name and Address of New Registered Agent

Name

HALELAMEN VERAPONG

Street Address (P.O. Box Number is Not Acceptable)

2200 N.W. 10th AVE #1

City

MIAMI

FL

Zip Code

33172

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] VERAPONG HALELAMEN

4-27-00

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

TITLE ☐ Delete
NAME D
STREET ADDRESS HALELAMEN, VERAPONG
CITY-ST-ZIP 7464 S.W. 48TH ST., SUITE 24
MIAMI FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME HALELAMEN VERAPONG
STREET ADDRESS 2200 N.W. 10th AVE #1
CITY-ST-ZIP MIAMI FL 33172

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

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

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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:

[Signature] VERAPONG HALELAMEN

Date

Daytime Phone #

4-27-00 (305) 406-3766

CR2E034 (9/99)