

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S85325

1. Entity Name

ELITE MODEL MANAGEMENT MIAMI CORPORATION

Principal Place of Business

Mailing Address

1200 COLLINS AVENUE  
SUITE 207  
MIAMI BEACH FL 33139  
US

PO BOX 398570  
MIAMI BCH FL 33239-8570

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

65-0288948

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

LANGEN, ROLAND  
112 SOUTH HIBISCUS ISLAND  
MIAMI FL 33139-5130

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 ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
KITTLER, ALAIN  
111 EAST 22 STREET  
NEW YORK NY 10010

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
CASABLANCAS, JOHN  
111 EAST 22 ST.  
NEW YORK NY 10010

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
CASTETS, CAPUCINE  
3166 CTR ST  
MIAMI FL 33133

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V.P.  
CASTETS, CAPUCINE  
2790 SW 23 Avenue  
Coconut Grove FL 33133

TITLE ☒ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ST  
ZAGURY,  
ONE UNION SQUARE S #23C  
NEW YORK NY 10003

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Secretary  
D'Angelico, Mary Ann  
16 Lauren Court  
Manalapan NJ 07726

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Mary Ann D'Angelico*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
MARY ANN D'ANGELICO

1/18/00 (212) 995-7309  
Date Daytime Phone #

CR2E034 (9/99)