

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S85325

1. Entity Name

ELITE MODEL MANAGEMENT MIAMI CORPORATION

FILED
Mar 21, 2001 8:00 am
Secretary of State

03-21-2001 90052 010 ***150.00

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, 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
D
KITTLER, ALAIN
111 EAST 22 STREET
NEW YORK NY 10010 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MARIE, GERALD
111 EAST 22 STREET
NEW YORK, NY 10010 ☐ Change ☒ Addition

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
CASTETS, CAPUCINE
2790 SW 23 AVENUE
MIAMI, FL 33133 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
CASTETS, CAPUCINE
2790 SW 23 AVENUE
MIAMI FL 33133 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
D'ANGELICO, MARY ANN
16 LAUREN COURT
MANAPAPAN NJ 07726 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
D'ANGELICO, MARY A
16 LAUREN COURT
MANAPAPAN NJ 07726 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
MOUNTAIN, ANNETTE
1200 COLLINS AVE #207
MIAMI BEACH, FL 33139 ☐ 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 an address, with all other like empowered.

SIGNATURE:

Mary Ann D'Angelico Sec/Threas 7/21/01 612-995-7309
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

0501701