

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90098 017 ***150.00

DOCUMENT # 27863

1. Entity Name

BIPRESS, Inc

Principal Place of Business Mailing Address Same
1674 Peridian Ave
Suite 211
MIAMI BEACH FL 33139

103953

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0325177 Applied For
 Not Applicable
 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SERGE ERNANDEZ
1674 Peridian Ave # 211
MIAMI BEACH FL 33139
President

7. Name and Address of New Registered Agent
 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 Serge Ernandy - SERGE ERNANDEZ president DATE 5.15.2000
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 NAME ☐ Delete
SERGE ERNANDEZ
1674 Peridian Ave # 211
MIAMI BEACH FL 33139 - President
 STREET ADDRESS CITY-ST-ZIP
 TITLE NAME ☐ Delete
 STREET ADDRESS CITY-ST-ZIP
 TITLE NAME ☐ Delete
 STREET ADDRESS CITY-ST-ZIP
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 TITLE NAME ☐ Delete
 STREET ADDRESS CITY-ST-ZIP
 TITLE NAME ☐ Delete
 STREET ADDRESS CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
 TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS CITY-ST-ZIP
 TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS CITY-ST-ZIP
 TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS CITY-ST-ZIP
 TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS CITY-ST-ZIP
 TITLE NAME ☐ Change ☐ Addition
 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: Serge Ernandy SERGE ERNANDEZ 5.15.2000
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # president (305) 5344372

CR2E034 (9/99)