

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 05, 2001 8:00 am
Secretary of State

05-05-2001 90828 050 ***150.00

DOCUMENT # V27863

1. Entity Name

BIPRESS, INC.

Principal Place of Business

Mailing Address

**1679 NERITIAN AVE
SUITE 211
MIAMI BEACH FL 33139
US**

**1679 NERITIAN AVE
SUITE 211
MIAMI BEACH FL 33139
US**

2. Principal Place of Business

3. Mailing Address

**935 8th #
Suite, Apt. #, etc.
14**

**276 NE 27th
Suite, Apt. #, etc.
-**

**City & State
MIAMI BEACH FL
Zip 33139 Country Dade**

**City & State
MIAMI FL
Zip 33137 Country Dade**



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

7. Name and Address of New Registered Agent

**ERNANDEZ, SERGE C
1679 NERITIAN AVE #211
MIAMI BEACH FL 33139**

Name **SERGE ERNANDEZ**
Street Address (P.O. Box Number is Not Acceptable)
935 8th #14
City **MIAMI BEACH FL** Zip Code **33139**

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 Ernandez**
Signature typed or printed name of registered agent and title if applicable.

President
(NOTE: Registered Agent signature required when reinstating)

4-29-01
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	P ERNANDEZ, SERGE C 1679 NERITIAN AVE #211 MIAMI BEACH FL 33139	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	SERGE C ERNANDEZ 935 8th #14 MIAMI BEACH FL 33139	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: **Serge Ernandez**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)