

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V48689

1. Entity Name

CONSUMER INFORMATION SERVICES NETWORK, INCORPORA

**FILED**  
**May 19, 2000 8:00 am**  
**Secretary of State**

05-19-2000 90015 034 \*\*\*150.00

Principal Place of Business

Mailing Address

12360 SW 132ND CT.  
SUITE #211-A  
MIAMI FL 33186  
US

12360 SW 132ND CT  
SUITE #211-A  
MIAMI FL 33186-6463  
US

101338



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0347459

Applied For

Not Applicable

Zip

Country

Zip

Country

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

GRAY, GARY A  
12360 SW 132ND CT.  
SUITE #211-A  
MIAMI FL 33186

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 PC  
STREET ADDRESS GRAY, GARY A  
CITY-ST-ZIP 12360 SW 132ND CT.  
MIAMI FL 33186

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

TITLE ☐ Delete  
NAME V  
STREET ADDRESS BHAGWANDAT, RICHARD  
CITY-ST-ZIP 11390 SW 162ND TERR  
MAIMI FL

TITLE ☒ Change ☐ Addition  
NAME V  
STREET ADDRESS BHAGWANDAT RICHARD  
CITY-ST-ZIP 12360 S.W. 132ct #211  
MIA FL 33186

TITLE ☐ Delete  
NAME S  
STREET ADDRESS BORELAND-GRAY, DEANNA A  
CITY-ST-ZIP 5230 HOLLYWOOD BLVD. #708  
HOLLYWOOD FL

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

TITLE ☐ Delete  
NAME T  
STREET ADDRESS BHAGWANDAT, ALLISON  
CITY-ST-ZIP 11390 SW 162 TERR  
MIAMI FL

TITLE ☒ Change ☐ Addition  
NAME T  
STREET ADDRESS BHAGWANDAT Allison  
CITY-ST-ZIP 12360 S.W. 132ct #211  
Miami FL 33186

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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/00 305 234-7328  
Date Daytime Phone #

CR2E034 (9/99)