

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V55580

1. Entity Name

WTG INTERNATIONAL INC.

FILED

Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90245 044 ***150.00

Principal Place of Business

8329 NW 66TH STREET
SUITE N-9
MIAMI FL 33018
US

Mailing Address

8329 NW 66 ST
MIAMI FL 33166
US

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 65-0350180

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

INOSTROZA, ROBERTO J.
17235 N.W. 61ST PL
MIAMI FL 33015

Name

ROBERTO J. INOSTROZA

Street Address (P.O. Box Number is Not Acceptable)

16376 N.W. 12 STREET

City

PEMBROKE PINES

FL

Zip Code

33028

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 of Registered Agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

ROBERTO J. INOSTROZA

4-3-01

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 DS
NAME INOSTROZA, NANCY
STREET ADDRESS 17325 NW 61 PLACE
CITY-ST-ZIP MIAMI FL 33015 ☐ Delete

TITLE DS
NAME INOSTROZA, NANCY ☒ Change ☐ Addition
STREET ADDRESS 16376 N.W. 12 STREET
CITY-ST-ZIP PEMBROKE PINES-FL 33028

TITLE DP
NAME INOSTROZA, ROBERTO J.
STREET ADDRESS 17325 NW 61 PLACE
CITY-ST-ZIP MIAMI FL 33015 ☐ Delete

TITLE DP
NAME INOSTROZA, ROBERTO J. ☒ Change ☐ Addition
STREET ADDRESS 16376 N.W. 12 STREET
CITY-ST-ZIP PEMBROKE PINES-FL 33028

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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TITLE
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERTO J. INOSTROZA 4-3-01

Date

Daytime Phone #

CR2E034 (10/00)