

FILED  
Jun 20, 2001 8:00 am  
Secretary of State

05-18-2001 91586 018 \*\*\*150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 678293  
1. Entity Name TAMARAC PROCO INC

Principal Place of Business 11601 W. Okeechobee Rd  
Hialeah Gardens, FL 33018  
Mailing Address same

2. Principal Place of Business 11601 W. Okeechobee Rd.  
Suite, Apt. #, etc.  
3. Mailing Address 11601 W. Okeechobee Rd.  
Suite, Apt. #, etc.

City & State Hialeah Gardens, FL  
Zip 33016 Country USA  
City & State Hialeah Gardens, FL  
Zip 33016 Country USA

4. FEI Number 59-2009229  
Applied For  Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required



49178

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
Urbieto, Ignacio Jr  
11601 W. Okeechobee Rd  
Hialeah Gardens, FL 33018

7. Name and Address of New Registered Agent  
Name Urbieto, Ignacio Jr.  
Street Address (P.O. Box Number is Not Acceptable) 11601 W. Okeechobee Rd.  
City Hialeah Gardens FL Zip Code 33016

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 Ignacio Urbieto DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.   
(See criteria on back)

10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		
TITLE	<u>Urbieto, Ignacio Jr</u>	<input type="checkbox"/> Delete
NAME	<u>7445 SW 115 Street</u>	
STREET ADDRESS	<u>Miami, FL 33156</u>	
CITY-ST-ZIP		
TITLE	<u>Urbieto, Guillermo</u>	<input type="checkbox"/> Delete
NAME	<u>25 castle Hnango Drive</u>	
STREET ADDRESS	<u>Fort Lauderdale, FL 33308</u>	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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)(f), 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: Ignacio Urbieto  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR