

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 19, 2000 8:00 am
Secretary of State

04-19-2000 90043 023 ***150.00

DOCUMENT # F23182
 1. Entity Name
BAYAMO RADIATORS, INC.

Principal Place of Business 5131 E TENTH AVE HIALEAH FL 33013	Mailing Address 5131-E TENTH AVE HIALEAH FL 33013-1729
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2. Principal Place of Business	3. Mailing Address 2773 W 69 TER
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State HIALEAH FL	City & State HIALEAH FL
Zip 33016	Country USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2065199	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARTINEZ, JOSE RAMON
5125 3 10TH AVENUE
SUITE 104
HIALEAH FL 33013

7. Name and Address of New Registered Agent

Name **AMARILYS R. MARTINEZ**
 Street Address (P.O. Box Number is Not Acceptable)
2773 W 69 TER
 City **Miami** 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 *Amarilys R. Martinez* DATE **3/29/00**
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.

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 STREET ADDRESS CITY-ST-ZIP	PVS MARTINEZ JOSE R 5131 E TENTH AVE HIALEAH, FL 00000	<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
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P AMARILYS R. MARTINEZ 2773 W 69 TER MIAMI FL 33016	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input 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: *Amarilys R. Martinez* DATE: **3/29/00** DAYTIME PHONE #: **(305) 823-1129**
SIGNATURE AND/OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)