

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **G87762**

1. Entity Name
SARON ENTERPRISES, INC.

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90081 028 ***150.00

Principal Place of Business Mailing Address
9875 BIRD ROAD 9875 BIRD ROAD
MIAMI FL 33165 MIAMI FL 33165-3977



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. 3. Mailing Address Suite, Apt. #, etc.

City & State City & State

4. FEI Number **59-2361049** 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

MARQUEZ, JOSE M.
782 NW LEJEUNE RD
SUITE 548
MIAMI FL 33126

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 _____ (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	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	HERRAN, MANUEL A.	8460 S.W. 5TH STREET	MIAMI FL				
VPD	GUERRA, ARMANDO J.	9475 JOUNEY'S END ROAD	CORAL GABLES FL				
TD	HERRAN, JOSE ANTONIO	8455 GRAND CANAL DR.	MIAMI FL				
VPD	URALDE, ALDO	1310 SW 99TH AVE	MIAMI FL				
SD	VALDES, DANIEL R.	9755 SW 62 ST	MIAMI FL				

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: *Daniel R. Valdes* **DANIEL R. VALDES** 01/20/2000 (305) 5790566
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)