

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 28, 2000 8:00 am
Secretary of State

03-24-2000 90075 026 ***150.00

DOCUMENT # J21110

1. Entity Name

LARIC, INC. *f*

Principal Place of Business

10676 SW 186 ST
MIAMI FL 33157

Mailing Address

10676 SW 186 ST
MIAMI FL 33157

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-2688497**

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MARIN, ISABEL C
9600 NW 25TH STREET, SUITE 6-A
MIAMI FL 33172-1A1G

7. Name and Address of New Registered Agent

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	<input type="checkbox"/> Delete
P MARIN, ISABEL C 9600 N.W. 25TH STREET STE 6-A MIAMI, FLA. 33172-1A1G	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

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 to an address, with all other like empowered.

SIGNATURE:

REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07-19-00

Date

305-477-2939

Daytime Phone #

0001-24-0000

Doc# J21110

308797

Security enhanced document. See back for details.

63044675 1045

LARIC, INC.
DBA PERRINE AUTO SHOP & SUPPLIES

10676 S.W. 186TH ST. 305-251-0008
MIAMI FL 33157-6720

DATE 03-20-2000

63-514/670
B

FAY
TO THE
ORDER OF

Department of State
One hundred fifty

\$150⁰⁰

⑆0016918 0114 1271 00 03-29-00⑆

DOLLARS

THE FIRST NATIONAL BANK
OF HOMESTEAD 08
PERRINE OFFICE
PERRINE, FLORIDA 33157

[Signature]

FOR 59-2688497

⑆001045⑆ ⑆067005145⑆ ⑆6050 991 0⑆ ⑆0000015000⑆