2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State
04-01-2002 90056 042 ***158.75

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DOCUMENT # M53406

1. Entity Name
PELFAM INCORPORATED

Principal Place of Business
11960 N.W. 87TH COURT
HIALEAH GARDENS FL 33016

Mailing Address
11960 N.W. 87TH COURT
HIALEAH GARDENS FL 33016

DO NOT WRITE IN THIS SPACE

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 59-2827933 — Applied For / Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
PELAEZ, JR., PEDRO
16329 NW 84TH AVE.
MIAMI FL

7. Name and Address of New Registered Agent
Name
11960 NW. 87TH COURT
HIALEAH GARDENS, FL 33018
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 $150.00
After May 1, 2002 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	Delete
PD	PELAEZ, PEDRO R.	6930 MAPLE TER	MIAMI LAKES FL	☐
VD	PELAEZ, PEDRO	16329 NW 84 AVE	MIAMI FL	☐
SD	PELAEZ, RAUL	17435 NW 86 AVE	MIAMI FL	☐
				☐
				☐
				☐

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
		11960 NW. 87TH COURT	HIALEAH GARDENS, FL 33018	☒	☐
		11960 NW 87TH COURT	HIALEAH GARDENS, FL 33018	☒	☐
		11960 NW 87TH COURT	HIALEAH GARDENS, FL 33018	☒	☐
				☐	☐
				☐	☐
				☐	☐

CR2E034 (9/01)

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: _____ 3/22/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #