

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000020087

1. Entity Name

HANDCRAFTED CABINETRY BY JERRY, INC.

**FILED**  
May 15, 2001 8:00 am  
Secretary of State

05-15-2001 90107 024 \*\*\*150.00

0190900

Principal Place of Business

6610 S.W. 44TH STREET  
MIAMI FL 33155

Mailing Address

6610 S.W. 44TH STREET  
MIAMI FL 33155

2. Principal Place of Business

6610 S.W. 44 ST

3. Mailing Address

6610 S.W. 44 ST

Suite, Apt. #, etc.

MIAMI - FL

Suite, Apt. #, etc.

City & State

City & State

MIAMI - FL

Zip

33155

Country

DADE

Zip

33155

Country

DADE

4. FEI Number

65-0987281

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GARCES, JERRY  
6610 S.W. 44TH STREET  
MIAMI FL 33155

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 \$150.00**  
**After MAY 1, 2001 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 PD  
NAME GARCES, JERRY  
STREET ADDRESS 6610 S.W. 44TH STREET  
CITY-ST-ZIP MIAMI FL 33155 ☐ Delete

TITLE VD  
NAME RODRIGUEZ, MARIVI  
STREET ADDRESS 6610 S.W. 44TH STREET  
CITY-ST-ZIP MIAMI FL 33155 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ 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 empowerments.

SIGNATURE

MARIVI RODRIGUEZ - MARIVI RODRIGUEZ - 4260/305-663-9566

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)