

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 19, 2002 8:00 am**  
**Secretary of State**

02-19-2002 90123 012 \*\*\*150.00

**DOCUMENT # P00000026958**

1. Entity Name  
**PEDRO M. DE ARMAS, P.A.**

Principal Place of Business  
**150 ALHAMBRA CIRCLE  
 SUITE 800  
 CORAL GABLES FL 33134**

Mailing Address  
**150 ALHAMBRA CIRCLE  
 SUITE 800  
 CORAL GABLES FL 33134**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**201 ALHAMBRA CIRCLE**

3. Mailing Address  
**201 ALHAMBRA CIRCLE**

Suite, Apt. #, etc.  
**SUITE 901**

Suite, Apt. #, etc.  
**SUITE 901**

City & State  
**CORAL GABLES, FL**

City & State  
**CORAL GABLES FL**

4. FEI Number **65-0985682**

Applied For  
 Not Applicable

Zip **33134** Country **USA**

Zip **33134** Country **USA**

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**

**DE ARMAS, PEDRO PA  
 150 ALHAMBRA CIRCLE  
 SUITE 800  
 CORAL GABLES FL 33134**

Name  
**DE ARMAS, PEDRO**

Street Address (P.O. Box Number is Not Acceptable)  
**201 ALHAMBRA CIRCLE**

**SUITE 800**

City  
**CORAL GABLES**

FL Zip Code **33134**

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 *P. M. de Armas, PEDRO M. DE ARMAS, DIRECTOR*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

2/2/02  
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**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D DE ARMAS, PEDRO M PA 150 ALHAMBRA CIRCLE SUITE 800 CORAL GABLES FL 33134</b>	<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
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	<b>P DE ARMAS, PEDRO M. 201 ALHAMBRA CIRCLE # 901 CORAL GABLES, FL 33134</b>	<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
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
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: *P. M. de Armas, PEDRO M. DE ARMAS, DIRECTOR*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/02  
Date

905 446 777  
Daytime Phone #

12/1/2001 3:41 AM

CR2E034 (9/01)