

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P01000036078**

FILED

1. Entity Name
UNIT 920 GRAND BAY, INC.

02 JUN 17 AM 9:26

C/O DOMINGO ALONSO, C.P.A.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**13251 SW 17TH CT.
MIRAMAR FL 33027**

Mailing Address
**13251 SW 17TH CT.
MIRAMAR FL 33027**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
13251 SW 17 CT.

3. Mailing Address
301 ALMERIA AVE.

Suite, Apt. #, etc.
SUITE # 3

City & State
MIRAMAR, FL

City & State
CORAL GABLES, FL

Zip
33027

Zip
33134

Country
US

Country
US

4. FEI Number 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

**ADMIRE, ROBERT O ESQ
2511 PONCE DE LEON BLVD., STE. 320
CORAL GABLES FL 33134**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	D ARREAZA, LUIS J 13251 SW 17TH CT. MIRAMAR FL 33027	<input type="checkbox"/> Delete
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*****150.00 ***150.00**

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: SIG
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

CR2E034 (9/01)

Attachment

UNIT 920 GRAND BAY, INC # P010000 36078
13251 SW 17TH COURT
MIRAMAR, FL 33027

June 5, 2002

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

I respectfully request an abatement of penalty for not filing the 2002 Uniform Business Report on time.

I do not live in the United States on a regular basis and by the time I got here, the 2002 UBR was already past due. I am now changing the mailing addresses of my corporations to another office; they will be in charge of receiving this form from now on.

Enclosed please find the 2002 UBR with all the necessary changes along with a check for \$150.00.

Please accept my explanations and apologies, and thank you in advance for your cooperation on this matter.

Sincerely,

Luis Arreaza- Gomez