

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 22, 2002 8:00 am**  
**Secretary of State**

07-22-2002 90151 008 \*\*\*150.00

DOCUMENT # P01000044236

1. Entity Name

Armenta Chavarro, Inc.

**DO NOT WRITE IN THIS SPACE**

B0130394

2. Principal Place of Business  
313 S. Ketch Drive

3. Mailing Address  
313 S. Ketch Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Sunrise, Florida

City & State  
Sunrise, Florida

4. FEI Number  
65-1101620

Applied For  
Not Applicable

Zip  
33326

Country  
Broward

Zip  
33326

Country  
Broward

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name  
Alvaro Armenta

Street Address (P.O. Box Number is Not Acceptable)  
313 S. Ketch Drive

City  
Sunrise

FL

Zip Code  
33326

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 re-issuing)

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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	President/Treasurer/Director Alvaro E. Armenta 313 S. Ketch Drive Sunrise, FL 33326	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary/Director Jose A. Chavarro 313 S. Ketch Drive Sunrise, FL 33326	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 15/02

305 6084139

Date

Daytime Phone #

Attachment

**Armenta Chavarro, Inc.**

313 S. Ketch Drive, Sunrise, Florida 33326

July 16, 2002

Florida Department of State  
Division of Corporations

P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Document #P01000044236

Dear Sir or Madam:

We are enclosing a Uniform Business Report for 2002 along with a check for \$150. The check should cover the filing fees for 2002. Our accountant brought to our attention that we should have received and filed this UBR. Unfortunately we moved and did not receive said report and thus did not file it. Please accept our apologies for the confusion and our request to waive the penalties involved. Should you have any questions, please do not hesitate to contact us.

Thank you in advance for your anticipated cooperation in this matter.

Sincerely,

  
Alvaro Armenta  
President

AA/gmo

Enclosures