# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000025918

1. Entity Name

PEDROSO CUBAN HOLDINGS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY 15 AM 9:18

| Principal Place of Business | Mailing Address |
|---|---|
| 1101 BRICKELL AVE.. SUITE 1400<br>MIAMI FL 33131-3117 | 1101 BRICKELL AVE.. SUITE 1400<br>MIAMI FL 33131-3117 |

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip / Country | Zip / Country |

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0677158 ~~APPLIED FOR~~ ☐ 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 |
|---|---|
| GUTIERREZ, NICOLAS JR<br>1101 BRICKELL AVE<br>STE 1400<br>MIAMI FL 33131 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>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, 2000 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 PSTD ☐ Delete<br>NAME GUTIERREZ, JR, NICOLAS J ESQ<br>STREET ADDRESS 1101 BRICKELL AVE STE 1400<br>CITY-ST-ZIP MIAMI FL 33131 | TITLE ☐ Change ☐ Addition<br>NAME T00000325192 7 -- 7<br>STREET ADDRESS -05/15/00--01024--021<br>CITY-ST-ZIP ****600.00 ****150.00 |
| TITLE ☐ Delete<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | TITLE ☐ Change ☐ Addition<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |
| TITLE ☐ Delete<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | TITLE ☐ Change ☐ Addition<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |
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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:** Nicolas J. Gutierrez, Jr. Nicolas J. Gutierrez, Jr, Esq., Pres/Sec/Treas/Dir. 4/26/00 (305)373-0330
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #