2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment w

SIGNATURE:

FILED **DOCUMENT # F10148** Apr 29, 2000 8:00 am Secretary of State PHOENIX GENERAL IMPORT & EXPORT, CORP. INC. 04-29-2000 90017 035 ***150.00 Principal Place of Business Mailing Address 2200 S.W. 8TH STREET 2200 S.W. 8TH STREET MIAMI FL 33135 MIAMI FL 33135-4914 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2063818 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent -6. Name and Address of Current Registered Agent Name RODRIGUEZ, JOSE M Street Address (P.O. Box Number is Not Acceptable) 6741 SW 28TH TERR MIAMI, FL 33155 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable DATE · FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition VTD Delete TITLE TITLE NAME RODRIGUEZ, MAYDA NAME STREET ADDRESS STREET ADDRESS 6741 SW 28 TERR CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 00000 ☐ Change ☐ Addition □ Delete TITLE NAME RODRIGUEZ, JOSE MANUEL NAME STREET ADDRESS 6741 SW 28 TERR STREET ADDRESS CITY-ST-ZIP ~~~ CITY-ST-ZIP MIAMI, FL 33155 ☐ Defete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS -F.j STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change □ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 received 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. or trustee empowered the an address, with all other like empowered