

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 29, 2000 8:00 am
Secretary of State

06-29-2000 90397 015 ***150.00

DOCUMENT # P98000091568
1. Entity Name

STEPHGAB MANAGEMENT, INC.

Principal Place of Business **Mailing Address**
7521 SW 92 COURT 7521 SW 92 COURT
MIAMI, FLORIDA 33173 MIAMI, FLORIDA 33173

2. Principal Place of Business **3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number:

65-0873034

Applied For

☐ Not Applicable

Zip

Country

Zip

Country

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

Santiago J. Freire
7521 SW 92 COURT
MIAMI, FLORIDA 33173

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

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

TITLE President ☐ Delete
NAME Santiago J. Freire
STREET ADDRESS 7521 SW 92 COURT
CITY - ST - ZIP MIAMI, FLORIDA 33173

TITLE Vice-President ☐ Delete
NAME Ana M. Freire
STREET ADDRESS 7521 SW 92 COURT
CITY - ST - ZIP MIAMI, FLORIDA 33173

TITLE Secretary ☐ Delete
NAME Stephanie Freire
STREET ADDRESS 7521 SW 92 COURT
CITY - ST - ZIP MIAMI, FLORIDA 33173

TITLE Treasurer ☐ Delete
NAME Gabriel Freire
STREET ADDRESS 7521 SW 92 COURT
CITY - ST - ZIP MIAMI, FLORIDA 33173

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
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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 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:  **Santiago J. Freire**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/20/00 305-273-3818

Date

Daytime Phone #