

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000088578

1. Entity Name

D'OROZ GIFTS, INC.

FILED
Sep 12, 2000 8:00 am
Secretary of State

09-12-2000 90017 002 ***550.00

Principal Place of Business

10215 SOUTHWEST 37TH TERRACE
 MIAMI FL 33165

Mailing Address

POST OFFICE BOX 650113
 MIAMI FL 33165

00106040



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0953367

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

SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134

Name

Alex A. Orozco

Street Address (P.O. Box Number is Not Acceptable)

City

Miami

FL

Zip Code

33165

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. ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

PSTD
 OROZCO, ANGEL A
 10215 SOUTHWEST 37TH TERRACE
 MIAMI FL 33165

☒ Delete

STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME

STREET ADDRESS
 CITY-ST-ZIP

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STREET ADDRESS
 CITY-ST-ZIP

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TITLE
 NAME

PSTD
 OROZCO, ALEX A
 SAME

☒ Change ☐ Addition

STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME

STREET ADDRESS
 CITY-ST-ZIP

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TITLE
 NAME

STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

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:

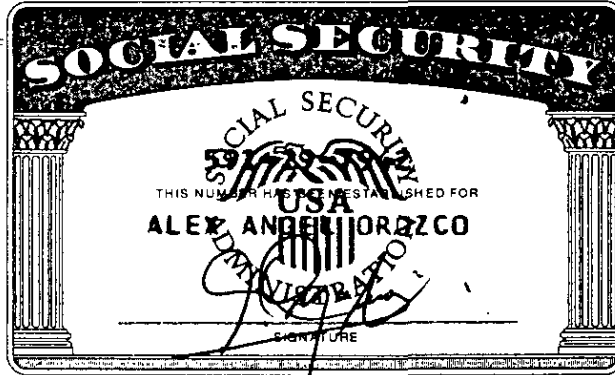
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Alex A. Orozco (president) 8-30-00 305-3106464

Date

Daytime Phone #

CR2E034 (5/00)

Attachment
P99000088578
B0106049



Florida CDL CLASS A

The Sunshine State
LICENSE NUMBER
0620-001-60-362-0

ALEX ANGEL OROZCO
10215 SW 37 TERR
MIAMI, FL 33165-3866

BIRTH DATE	SEX	HGT.	REST.	ENDORSE
10-02-60	M	6-00		X

ISSUED	EXPIRES	DUPLICATE
07-26-00	10-02-06	00-00-00

SAFE DRIVER

Operation of a motor vehicle constitutes consent to any sobriety test required by law

PETITION FOR NAME CHANGE
COURT United States District Court
Miami, Florida

Attachment
P99000088578
B0106049

INSTRUCTIONS TO THE PETITIONER: Under the Immigration and Nationality Act of 1952, as amended by the Immigration Act of 1990 (Sec 336), an applicant who requests a change to his or her name must have the oath administered by a district court by decree of that court. The decree of name change will be issued at the same time as the administration of the oath of allegiance, and the certificate of naturalization shall be issued in accordance therewith. If you elect the United States district court ceremony and wish to change your name, please print or type the information requested.

I hereby petition this court to change my name. In support of my petition I truthfully state the following:

- (1) My full and correct name is **Angel Alejandro Orozco**.
- (2) My present place of residence is
10215 SW 37 Ter
Miami FL 33165
- (3) My country of birth is **Cuba**.
- (4) My date of birth is **October 2, 1960**.
- (5) My INS registration number is **A 025 440 929**.

I certify that I am not seeking a change of name for any unlawful purpose such as the avoidance of debt or evasion of law enforcement.

I petition the court to change my name to: **Alex Angel Orozco**.

2/14/00 x Angel Alejandro Orozco
Date Signature of Petitioner

CERTIFICATION OF NAME CHANGE

I certify that the above petition was granted by the court on JUN 27 2000

CLARENCE G. MADDOX II

Date

Clerk

(by Deputy Clerk)