

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 21, 2001 8:00 am
Secretary of State

02-21-2001 90052 004 ***150.00

0188948

DOCUMENT # F11032

1. Entity Name

OUR LADY OF THE ROSARY SCHOOL, INC.

Principal Place of Business

Mailing Address

10701 SW 95 ST
MIAMI FL 33176

~~11491 SW 103 ST~~
~~MIAMI FL 33176~~
US

2. Principal Place of Business

3. Mailing Address

10701 SW 95 STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

MIAMI, FL

City & State

City & State

4. FEI Number

59-2074432

Applied For

Not Applicable

Zip

Country

Zip

Country

33176

U.S.A.

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

SIRVEN, MARTHA R

~~11491 SW 103 ST~~

~~MIAMI FL 33176~~

Name

MARTHA R. SIRVEN

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

10701 SW 95 STREET

MIAMI FL 33176

City

MIAMI

FL

Zip Code

33176

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

Martha R. Sirven

MARTHA R. SIRVEN

2/19/01

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, 2001 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 ☐ Delete
NAME P
STREET ADDRESS SIRVEN, MARTHA R.
CITY-ST-ZIP ~~9760 SW 94 TERRACE~~
~~MIAMI FL~~

TITLE ☒ Change ☐ Addition
NAME PRESIDENT
STREET ADDRESS MARTHA R. SIRVEN
CITY-ST-ZIP 10701 SW 95 STREET
MIAMI FL 33176

TITLE ☐ Delete
NAME ST
STREET ADDRESS SIRVEN, JOSE L.
CITY-ST-ZIP ~~11491 SW 103 ST~~
~~MIAMI FL 33176~~

TITLE ☒ Change ☐ Addition
NAME SECRETARY/TREASURER
STREET ADDRESS JOSE L. SIRVEN
CITY-ST-ZIP 10701 SW 95 STREET
MIAMI, FL 33176

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

Martha R. Sirven MARTHA R. SIRVEN, 2/19/01

305-271-8389

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)