

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K73276

1. Entity Name
AIR -1- BOUQUET CORPORATION

Principal Place of Business
109 N.W. 62 TERRACE
MIAMI FL 33178

Mailing Address
10965 N.W. 62 TERRACE
MIAMI FL 33178

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90239 024 ***150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0109841

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

PINEROS, ANTONIO J.
10965 N.W. 62 TERRACE
MIAMI FL 33178

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, 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 PD
NAME PINEROS, ANTONIO J.
STREET ADDRESS 10965 N.W. 62 TERRACE
CITY-ST-ZIP MIAMI FL 33178 ☐ Delete

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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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)(f), 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:

Antonio J. Pineros
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANTONIO J. PINEROS S.D.

APRIL 20, 2001-305-594-5781

Date

Daytime Phone #

CR2E034 (10/00)

CHARGE 2001 04/30/2001 D.F.A. FOR \$150.00