2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Feb 01, 2001 8:00 am Secretary of State DOCUMENT # 266685 **UNLIMITED IMPORTS & EXPORTS INC** 02-01-2001 90093 041 ***150.00 Principal Place of Business Mailing Address 9000 SW 46TH TERRACE P O 80X 350752 MIAMI FL 33135-0752 MIAMI FL 33165 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0315496 Not Applicable Zip Ζiρ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **ROMAN CAMPA** Street Address (P.O. Box Number is Not Acceptable) 9000 S.W. 46TH TERRACE MIAMI FL 33165 Zip Code FL 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. DATE (NOTE: Registered Agent signature required when reinstating) 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, 2001 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 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Addition TITLE ☐ Delete TITLE CAMPA, ROMAN NAME NAME 9000 S.W. 46TH TERR STREET ADDRESS STREET ADDRESS MIAMI FL 33165-5952 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE CAMPA, RAQUEL NAME NAME 9000 S.W. 46TH TERR STREET ADDRESS STREET ADDRESS MIAMI FL 33165-5952 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE CAMPA, ROMAN J NAME NAME 9000 S.W. 46TH TERR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33165** CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete RODIGQUEZ, RAQUEL NAME NAME 9000 S.W. 46TH TERR STREET ADDRESS STREET ADDRESS MIAMI FL 33165 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Delete TITLE ☐ Addition 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 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.

AND NAME OF SIGNING OFFICER OR DIRECTOR

FILED

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 266685 1. Entity Name UNLIMITED IMPORTS & EXPORTS INC					Hack 910' 2Cel	76	0
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							11) [11]
2. Principal Pla	ace of Business	3. Mailing Address	•.'				
Suite, Apt. #	#. etc	Suite, Apt. #, etc.		. DO NOT V	VRITE IN THIS SPA	CE	
City & State	2	- City & State		4. FEI Number 65-0315	496		ied For
Zip ±	Country	Zip	Country	-5. Centificate of Status Desire	ed □ - \$8	.75 Additi	Applicable
	6. Name and Address of Cu	rent Registered Agent	· · · · · · · · · · · · · · · · · · ·	7. Name and Address of Ne		Required nt	
		Test Hegisterea Agent	Name				- · · · · · · · · · · · · · · · · · · ·
ROMAN CAMPA 9000 S.W. 46TH TERRACE MIAMI FL 33165			Street Addres	ss (P.O. Box Number is Not Accept	table)		
			<u> </u>			Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
SIGNATURE _	Signature, typed or printed name of registered	<u> </u>	E Registered Agent signature reg	gurea when reinstating)	DATE		
SIGNATURE _ 9. This corpo Tax filing n		o agent and site if applicable. (NOTE Ingible FILE NOW! After MAY 1, 20	registered office or regi	10. Election Campaig Trust Fund Contril	DATE n Financing oution.	\$5.00 Added	May Be
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SIGNATURE:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-19-01 Date

(305) 223-0820