

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 364476**

1. Entity Name

AMBER JEWELERS CORP.**FILED**
May 27, 2002 8:00 am
Secretary of State

04-22-2002 90132 020 ***150.00

Principal Place of Business

**36 NE FIRST ST ROOM 1002
MIAMI FL 33132**

Mailing Address

**36 NE FIRST ST ROOM 1002
MIAMI FL 33132**

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 **59-1375443**Applicable
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**SUAREZ, WALTER L.
185 S.W. 130TH AVE.
MIAMI FL 33184**

7. Name and Address of New Registered Agent

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, 2002 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00**
Added to

11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	SUAREZ, WALTER L.	
STREET ADDRESS	185 SW 130 AVE	
CITY- ST- ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	MOREJON, RAFAEL P.	
STREET ADDRESS	1760 S. W. 64TH AVE	
CITY- ST- ZIP	MIAMI FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	SUAREZ, DAISY S	
STREET ADDRESS	185 SW 130 AVE	
CITY- ST- ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN

TITLE		<input type="checkbox"/> Change
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change
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STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change
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, 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

Date

Daytime Phone #

4-11-02 305 3738089

Attachment # 364476

FOR ~~DEPOSIT ONLY~~
AMERICAN ATLANTIC
1000000150001
PO88861* CO67011825: 2051202806K

Chk# - Date 04/26/02

8861 537530
AMBER JEWELERS CORP.
28 NE 1ST STREET SUITE 1002
MIAMI, FLORIDA 33132
PAY TO THE ORDER OF Department of State
one hundred fifty 00/100 \$150.00
AMERICAN ATLANTIC
1000000150001
PO88861* CO67011825: 2051202806K
FOR DEPOSIT ONLY # 364476
DATE 09/04/02
DOLLARS 0

30949

Chk# 8861 - Date 04/26/02 - Amount \$150.00

8861