

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 02, 2003 8:00 am
Secretary of State

04-02-2003 90044 018 ***150.00

DOCUMENT # 395601

1. Entity Name
ORMA REALTY INC.



Principal Place of Business
**P.O. BOX 540043
MIAMI FL 33265-7043**

Mailing Address
**P O BOX 650043
MIAMI FL 33265-0043
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-1434300

Applied For
Not Applicable

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

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CALLEJAS, ORLANDO
299 ALHAMBRA CIRCLE, SUITE 318
CORAL GABLES FL 33134**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
CALLEJAS, ORLANDO
3225 S.W. 94TH AVE.
MIAMI FL** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
CALLEJAS, MARIA
3225 S W 94TH AVE
MIAMI, FL 00000** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/01/03

Date

Daytime Phone #

CR2E034 (10/02)



ORMA REALTY, INC.

299 Alhambra Circle, Suite 318

Coral Gables, Florida 33134

Tel (305) 445-1940

(305) 778-1940

attachment
90067533
#395601

ORLANDO CALLEJAS
LIC. REAL ESTATE BROKER

~~xxx (305) 445-1940~~
FAX (305) 225-0099

April 1st., 2003.

Division of Corporation,
Uniform Business Report Filings,
P. O. Box 1500,
Tallahassee, Fla. 32302-1500.

Re: Orma Realty, Inc., Document #395601,
FEI #59-1434300, Change in line 6.

TO WHOM IT MAY CONCERN:

We respectfully request you to change the address of current
Registered Agent as follows:

From: 299 Alhambra Circle, Suite 318,
Coral Gables, Fla. 33134.

To: 3225 S. W. 94th. Avenue,
Miami, Florida. 33165-3002.

All other numbers under document #395601, remains the same.

Thanking you in advance for your prompt attention to the
above, we are;

Sincerely yours,

Orlando Callejas
Orlando Callejas,
Realtor.

OC/hs.

cc.- Our files.

Encls. Document #395601 and
Check #2100 for \$150.00
for filing fees.