

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 486180

1. Entity Name

ANTILLES BEARINGS, INC.

FILED
Feb 26, 2000 8:00 am
Secretary of State

02-26-2000 90023 047 ***150.00

Principal Place of Business

7990 SOUTH WEST 88 STREET
MIAMI FL 33156

Mailing Address

7990 SOUTH WEST 88 STREET
MIAMI FL 33156-7457

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1634437

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEON, ARTURO
7990 SW 88TH ST.
MIAMI FL 33156-4457

7. Name and Address of New Registered Agent

Name

NO CHANGES

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, 2000 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

TITLE ☐ Delete

NAME
LEON, ARTURO
STREET ADDRESS
7990 S W 88TH ST
CITY - ST - ZIP
MIAMI, FL 00000

VD ☐ Delete

NAME
SERRA, LIBERTAD
STREET ADDRESS
43 ST 752 LAS LOMAS
CITY - ST - ZIP
RIO PIEDRAS PR

D ☐ Delete

NAME
BOSCH, JORGE J
STREET ADDRESS
101 S E SECOND AVE
CITY - ST - ZIP
MIAMI, FL 00000

V ☐ Delete

NAME
BOSCH, JOSE
STREET ADDRESS
101 SE 2ND AVE
CITY - ST - ZIP
MIAMI, FL 00000

☐ Delete

NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

NAME
STREET ADDRESS
CITY - ST - ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition

NAME
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CITY - ST - ZIP

TITLE ☐ Change ☐ Addition

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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:

Libertad Serra
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 8, 2000 (787)792-1975

Date

Daytime Phone #

CR2E034 (9/99)