

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

Page 1 of 3

DOCUMENT # 518976

1. Entity Name

O. Garcia Corporation

FILED

02 OCT 28 PM 3:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

10020 SW 41 Terr

Suite, Apt. #, etc.

3. Mailing Address

10020 SW 41 Terr

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

591753757

Applied For

Not Applicable

Zip

Country

33105

Zip

Country

33105

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Rita D. Garcia

Street Address (P.O. Box Number is Not Acceptable)

10020 SW 41 Terrace

City

Miami

FL

Zip Code

33105

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 resigning)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
P/O  
Rita D. Garcia  
10020 SW 41 Terr.  
Miami, FL 33105

TITLE  
NAME  
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CITY - ST - ZIP

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**DO NOT WRITE  
IN THIS SPACE**

8000004795498-9  
01/25/02-01003-021  
\*\*\*1350.00 \*\*\*450.00

6/12/00 90001/021 \$150.00

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 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 #

PAGE 2 OF 3

TO: DIVISION OF CORPORATION  
P.O. BOX 6327  
TALLAHASSEE, FL 32314


TO WHOM IT MAY CONCERN:

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR THE 2000 UNIFORM BUSINESS REPORT (FIRST NOR SECOND NOTICE OF THE UBR). I DID SEND THE UBR IN JUNE OF THE YEAR 2000 BUT NEVER GOT A RESPONSE FROM YOUR OFFICE AND I AM DOING AN ATTEMPT TO FILE THIS UBR ONCE AGAIN.

PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT MY CORPORATION IN ITS ACTIVE STATUS AND TO WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER.

CORDIALLY,



RITA D. GARCIA  
PRESIDENT

DA9C303


TO: DIVISION OF CORPORATION  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

ATTN: TYRONE

THIS LETTER IS TO AUTHORIZE YOU TO PUT THE INFORMATION OF THE  
REGISTERED AGENT IN QUESTION 7 OF THE UBR FORM.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER.

CORDIALLY,

  
RITA D. GARCIA  
PRESIDENT