

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 528291

1. Entity Name

ALVARIKOKES, INC.

FILED
Apr 28, 2001 8:00 am
Secretary of State

04-28-2001 90061 028 ***150.00

0149299

Principal Place of Business

200 SOUTH BISCAYNE BLVD.
41 FLOOR
MIAMI FL 33131

Mailing Address

200 SOUTH BISCAYNE BLVD.
41 FLOOR
MIAMI FL 33131

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

200 S. Biscayne Blvd.
Suite, Apt. #, etc.
Suite # 4100

City & State

City & State
Miami, Florida

Zip

Country

Zip
33131

Country

4. FEI Number 59-1815781

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~RJVF-CORPORATE SERVICES, INC.~~
200 SOUTH BISCAYNE BLVD.
41 FLOOR
MIAMI FL 33131

Name
RJVF Corporate Services, Inc.
Street Address (P.O. Box Number is Not Acceptable)

200 South Biscayne Blvd., Suite #4100

City Miami FL Zip Code 33131

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTD
NAME ALVAREZ, JAIME ☐ Delete
STREET ADDRESS 2 S. BISCAYNE BLVD.
CITY-ST-ZIP MIAMI FL

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

TITLE VSD
NAME DE ALVAREZ, CARMEN ☐ Delete
STREET ADDRESS 2 S. BISCAYNE BLVD.
CITY-ST-ZIP MIAMI FL

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

TITLE AS
NAME VALDES-FAULI, RAUL E ☒ Delete
STREET ADDRESS 2 S. BISCAYNE BLVD.
CITY-ST-ZIP MIAMI FL

TITLE AS ☐ Change ☒ Addition
NAME HEBERTO R. ESPINOSA
STREET ADDRESS 3804 Alhambra Circle
CITY-ST-ZIP Coral Gables, Fl 33134

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)