2000 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED
Jun 09, 2000 8:00 am
Secretary of State
05-10-2000 90096 023 ***150.00

DOCUMENT # 553548

1. Entity Name

MEMBIELA & ASSOCIATES INC.

Principal Place of Business	Mailing Address
782 N.W. 42 AVE STE 430 MIAMI FL 33126 US	782 N.W. 42 AVE STE 430 MIAMI FL 33126-5549 US

DO NOT WRITE IN THIS SPACE

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 59-1767830 ☐ 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
MEMBIELA,JOAQUIN 782 N.W. 42 AVE STE 430 MIAMI FL 33126	Name: OSVALDO MARTINEZ Street Address (P.O. Box Number is Not Acceptable): 782 N.W. 42ND AVENUE STE 430 City: MIAMI FL Zip Code: 33126-5549

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: OSVALDO MARTINEZ — Osvaldo Martinez — 4/27/00
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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD MEMBIELA, JOAQUIN R 782 N.W. 42ND AVE., #430 MIAMI FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D JOAQUIN MEMBIELA 782 NW 42 AVE STE 430 MIAMI FL 33126	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MEMBIELA, MARTA M. 782 N.W. 42ND AVE., #430 MIAMI FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP/D MARTA MEDINA MEMBIELA 782 N.W. 42ND AVE, #430 MIAMI, FL 33126	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D ORESTES CARDOSO 782 N.W. 42ND AVE., #430 MIAMI, FL 33126	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/D OSVALDO MARTINEZ 782 N.W. 42ND AVE., #430 MIAMI, FL 33126	☐ 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

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: MARTA MEDINA MEMBIELA — Marta M. Membiela (4-24-00) — (305) 446-4006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #