


NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Sep 07, 1999 8:00 am
Secretary of State
09-07-1999 90002 018 ***550.00

PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F53894** ✓
Corporation Name
U-MAR INTERNATIONAL, INC.

Principal Place of Business
**2 N.W. 7TH STREET
BROKE PINES FL 33029**

Mailing Address
**17432 NW. 7TH STREET
PEMBROKE PINES FL 33029
US**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/17/1981

4. FEI Number
59-2139711

Applied For
☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property. ☐ Yes ☒ No

Principal Place of Business
19330 W. OAKMONT DR.

2a. Mailing Address
19330 W. OAKMONT DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
MIAMI FL.

City & State
MIAMI FL.

Zip
33015

Country
U.S.A.

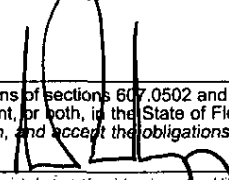
Zip
33015

Country
U.S.A.

9. Name and Address of Current Registered Agent
**RODRIGUEZ, M
17432 N.W. 7TH STREET
PEMBROKE PINES FL 33029**

10. Name and Address of New Registered Agent
81 Name **MARIO LUIS RODRIGUEZ**
82 Street Address (P.O. Box Number is Not Acceptable)
19330 WEST OAKMONT DR.
83
84 City **MIAMI** FL 85 Zip Code **33015**

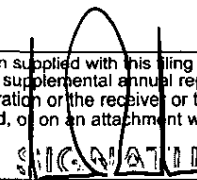
Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE  **MARIO L. RODRIGUEZ** DATE **9/1/99**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input checked="" type="checkbox"/> DELETE	D RODRIGUEZ, LILIAN C. 13763 PICARSA DR. JACKSONVILLE, FL 00000	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	D RODRIGUEZ, MARIO L 19330 WEST OAKMONT DRIVE MIAMI, FL 00000	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	SDT RODRIGUEZ, LUISA O. 17432 N.W. 7TH STREET PEMBROKE PINES FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	19330 WEST OAKMONT DR. MIAMI, FL. 33015
<input type="checkbox"/> DELETE	P RODRIGUEZ, MARIO E 17432 N.W. 7TH STREET PEMBROKE PINES FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	19330 WEST OAKMONT DR. MIAMI, FL. 33015
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **MARIO L. RODRIGUEZ** DATE **9/1/99** PHONE **305-829-2998**

Signature and typed or printed name of signing officer or director. Daytime Phone #

CR2E034 (5/99)