

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000006085

1. Entity Name

KAREN WEINER ESCALERA ASSOCIATES, INC.

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90112 002 ***150.00

Principal Place of Business

104 FIFTH AVE.
NEW YORK NY 10011

Mailing Address

104 FIFTH AVE.
NEW YORK NY 10011

2. Principal Place of Business

KWE - ASSOCIATES

Suite, Apt. #, etc.

125 MAIDEN LANE #3

City & State

New York, NY

Zip

10038

Country

USA

3. Mailing Address

KWE - ASSOCIATES

Suite, Apt. #, etc.

125 MAIDEN LANE #3

City & State

New York NY

Zip

10038

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

13-3066591

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ESCALERA, KAREN WEINER
1550 MADRUGA AVE.
SUITE 305
CORAL GABLES FL 33146

7. Name and Address of New Registered Agent

Name

KAREN WEINER ESCALERA

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

10911 S.W. 59th COURT

City

Miami

FL

Zip Code

33156

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)

KAREN WEINER ESCALERA

3/30/01
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

TITLE PSD
NAME ESCALERA, KAREN W
STREET ADDRESS 640 REINANTE AVE.
CITY-ST-ZIP CORAL GABLES FL 33156 ☐ Delete

TITLE D
NAME ESCALERA, ALFONSO
STREET ADDRESS 640 REINANTE AVE.
CITY-ST-ZIP CORAL GABLES FL 33156 ☐ Delete

TITLE D
NAME WEINER, ARTHUR
STREET ADDRESS 63 LAKESIDE RD.
CITY-ST-ZIP MT. KISCO NY 10549 ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME KAREN WEINER ESCALERA
STREET ADDRESS 10911 S.W. 59th COURT
CITY-ST-ZIP MIAMI, FL. 33156

TITLE ☒ Change ☐ Addition
NAME ALFONSO ESCALERA
STREET ADDRESS 10911 SW 59th COURT
CITY-ST-ZIP MIAMI, FL 33156

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

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

TITLE ☐ Change ☐ Addition
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:

Christina Miranda, VP.

3/30/01

212-255-7403

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)