

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # G39294**

1. Entity Name

A-1 MODERN ELECTRONICS CORP.

Principal Place of Business

7636 SW 117TH AVE.
MIAMI FL 33183
US

Mailing Address

7636 SW 117TH AVE.
MIAMI FL 33183
US

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 **59-2347967**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

RAMIREZ, ALBA L
7636 S.W. 117 AVENUE
MIAMI FL 33183

7. Name and Address of New Registered Agent

Name **Alba Ramirez**Street Address (P.O. Box Number is Not Acceptable)
3325 SW 67th Avenue**Miami, FL**City **Miami****FL**Zip Code
33155

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PVS** ☒ Delete
NAME **RAMIREZ, HUGO MARIO**
STREET ADDRESS **12217 SW 16 TERR #107**
CITY-ST-ZIP **MIAMI FL**TITLE **TD** ☒ Delete
NAME **RAMIREZ, HUGO MARIO**
STREET ADDRESS **12217 SW 16 TERR #107**
CITY-ST-ZIP **MIAMI FL**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☒ Change ☐ Addition
NAME **Ramirez, Hugo**
STREET ADDRESS **3325 SW 67th Avenue**
CITY-ST-ZIP **Miami, FL 33155**TITLE **Treasurer** ☒ Change ☐ Addition
NAME **Ramirez, Alba**
STREET ADDRESS **3325 SW 67th Avenue**
CITY-ST-ZIP **Miami, FL 33155**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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 #

FILED
Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90103 049 ***150.00

00017902

DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)