2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2001 08:00 AM
Secretary of State

DOCUMENT # **G53581**

1. Entity Name
ANDY'S ASSURANCE AGENCY OF MILLER ROAD, INC.

Principal Place of Business	Mailing Address
13706 SW 56 ST., #104	13706 SW 56 ST., #104
MIAMI FL	MIAMI FL
33183	33183

2. Principal Place of Business	3. Mailing Address
13706 SW 56 ST., #104	13706 SW 56 ST., #104
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI FL	City & State: MIAMI FL
Zip: 33183 Country: US	Zip: 33183 Country: US

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0130239
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RODRIGUEZ LORETA
1441 W. FLAGLER ST
MIAMI FL
33135 US

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 LORETA RODRIGUEZ 04/28/2001
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	VSD	☐ Delete	TITLE	VSD	☒ Change ☐ Addition
NAME	RODRIGUEZ, LORETA		NAME	RODRIGUEZ, LORETA	
STREET ADDRESS	1441 W. FLAGLER ST.		STREET ADDRESS	1441 W. FLAGLER ST.	
CITY-ST-ZIP	MIAMI FL		CITY-ST-ZIP	MIAMI FL 33135	
TITLE	PTD	☐ Delete	TITLE	PTD	☒ Change ☐ Addition
NAME	RODRIGUEZ, ANDY		NAME	RODRIGUEZ, ANDY	
STREET ADDRESS	1441 W. FLAGLER ST.		STREET ADDRESS	1441 W. FLAGLER ST.	
CITY-ST-ZIP	MIAMI FL		CITY-ST-ZIP	MIAMI FL 33135	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

CR2E034 (11/00)

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: LORETA RODRIGUEZ VSD 04/28/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #