

2001 UNIFORM BUSINESS REPORT (UBR)

10f2

0033741 AV

DOCUMENT # G62206

1. Entity Name
FLORIDA NATIONAL BROKERS, INC.

FILED

01 DEC 31 AM 10:44

Principal Place of Business

7100 N.W. 12TH STREET
SUITE 103
MIAMI FL 33126
US

Mailing Address

7100 N.W. 12TH STREET
SUITE 103
MIAMI FL 33126
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2453498

Applied For
Not Applicable

Zip

Country

Zip

Country

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

LLARENA, VICTOR
7400 SW 133RD AVE.
MIAMI FL 33183

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 *[Signature]* VICTOR LLARENA - PRESIDENT 12-07-01
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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 ☐ Delete
DPS
LLARENA, VICTOR
STREET ADDRESS 7400 SW 133 AVE
CITY-ST-ZIP MIAMI FL

TITLE NAME ☐ Change ☐ Addition
800004769888--3
-01/11/02--01060--022
****150.00 ****150.00

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
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]* SIGNATURE REQUIRED

10-31-01

305-592-3050

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (5/01)

202



Florida National Brokers, Inc.

CUSTOM HOUSE BROKERS

December 19, 2001

Barbara Mitchell
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

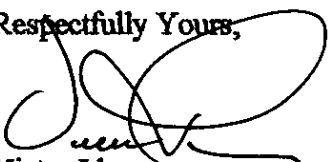
Ref# G62206

Dear Mrs. Mitchell:

I received your notice and I am returning it with the signature required. With reference to the payment, I never received the first notice. These dasy things are a bit tough and it would be very difficult to pay the \$750.00. Therefore, I am enclosing a check for \$150.00 with the hope that you will make this exception. I will be carefully monitoring the mail to ensure receipt of the 2002 notice. It of course will be filed timely.

In the event that you cannot accept this offer, please let me know and I will comply with your decision.

Respectfully Yours,



Victor Llarena