

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G87762

1. Entity Name

SARON ENTERPRISES, INC.

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90081 028 ***150.00

Principal Place of Business

9875 BIRD ROAD
MIAMI FL 33165

Mailing Address

9875 BIRD ROAD
MIAMI FL 33165-3977

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

59-2361049

Applied For

Not Applicable

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

MARQUEZ, JOSE M.
782 NW LEJEUNE RD
SUITE 548
MIAMI FL 33126

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, 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, 2000 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 PD
NAME HERRAN, MANUEL A.
STREET ADDRESS 8460 S.W. 5TH STREET
CITY-ST-ZIP MIAMI FL ☐ Delete

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

TITLE VPD
NAME GUERRA, ARMANDO J.
STREET ADDRESS 9475 JOUNEY'S END ROAD
CITY-ST-ZIP CORAL GABLES FL ☐ Delete

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

TITLE TD
NAME HERRAN, JOSE ANTONIO
STREET ADDRESS 8455 GRAND CANAL DR.
CITY-ST-ZIP MIAMI FL ☐ Delete

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

TITLE VPD
NAME URALDE, ALDO
STREET ADDRESS 1310 SW 99TH AVE
CITY-ST-ZIP MIAMI FL ☐ Delete

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

TITLE SD
NAME VALDES, DANIEL R.
STREET ADDRESS 9755 SW 62 ST
CITY-ST-ZIP MIAMI FL ☐ Delete

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:

DANIEL R. VALDES
DANIEL R. VALDES

01/20/2000 (305) 5790566

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)