

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H41876

1. Entity Name

CONFAMART CORP.

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90318 044 ***158.75

Principal Place of Business

Mailing Address

~~5300 N.W. 37TH AVE.~~
~~MIAMI FL 33143~~

~~6300 N.W. 37TH AVE.~~
~~MIAMI FL 33142-9208~~

2. Principal Place of Business

3. Mailing Address

9851 N.W. 106th Street

9851 N.W. 106th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite # 3

Suite # 3

City & State

City & State

Medley, Florida

Medley, Florida

Zip

Country

Zip

Country

33178

33178

4. FEI Number

59-2493944

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

MEJIA, FABIO

~~5300 NW 37 AVE~~

~~MIAMI FL 33142~~

Name

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

9851 N.W. 106th Street Suite # 3

City

Medley

FL

Zip Code

33178

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 ☐ Delete
NAME P
STREET ADDRESS MEJIA, FABIO
CITY-ST-ZIP ~~15001 BRISTOL LANE~~
~~DAVE FL~~

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 6681 S.W. 161 Terr.
CITY-ST-ZIP Pembroke Pines, FL 33331

TITLE ☐ Delete
NAME V
STREET ADDRESS MEJIA, OSCAR
CITY-ST-ZIP 10213 NW 52 LANE
MIAMI FL 33178

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

TITLE ☐ Delete
NAME ST
STREET ADDRESS MEJIA, LUCERO
CITY-ST-ZIP 10213 NW 52 LANE
MIAMI FL 33178

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)