

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # J10958**

1. Entity Name

UPMAN ENTERPRISES, INC.

Principal Place of Business

6706 BENJAMIN ROAD, SUITE 400
TAMPA FL 33634

Mailing Address

6706 BENJAMIN ROAD, SUITE 400
TAMPA FL 33634

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2662651

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

**GONZALEZ, ALICE
10137 MAINLANDS BLVD W
PINELLAS PARK FL 33782**

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, 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	VSD			
	GONZALEZ, ALICE			
	10137 MAINLANDS BLVD W			
	PINELLAS PARK FL 33782			

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

	PT			<input type="checkbox"/> Delete
	SANCHEZ-MARCOS, ELPIDIO			
	6706 BENJAMIN RD STE 400			
	TAMPA FL			

				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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	D			<input type="checkbox"/> Delete
	SANCHEZ-MARCOS LUIS			
	6706 BENJAMIN ROAD #400			
	TAMPA FL			

				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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	D			<input type="checkbox"/> Delete
	GARCIA, ROBERTO			
	6706 BENJAMIN ROAD, #400			
	TAMPA FL			

				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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	D			<input type="checkbox"/> Delete
	SALCINES, E J			
	111 E MADISON ST			
	TAMPA FL 33602			

				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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				<input type="checkbox"/> Delete
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				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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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:**Alice Gonzales** **Alice Gonzales, Vice Pres. 3/19/01** **813 886 7893**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)