## 2002 UNIFORM BUSINESS REPORT (UBR) FILED May 27, 2002 8:00 am Secretary of State **DOCUMENT #** J15735 1. Entity Name 05-27-2002 90503 047 \*\*\*150.00 CORONEL ENTERPRISES, INC Principal Place of Business Mailing Address 9325 W. Okeechobbee Rd #5 9325 W. Okeechobbee Rd #5 Hialeah, FL 33016 Hialeah, FL 33016 2. Principal Flace of Business 3. Mailing Address 8758 SW 8th Street Suite. Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2688944 Zip Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Fee Required 7. Name and Address of New Registered Agent Name CORONEL, OCTAVLO G. 8954 NW 112 Street Street Address (P.O. Box Number is Not Acceptable) Hialeah Gardens, FL 33018 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, typud or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax liting requirement and elects to do so. 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 \$5.00 May Be (See criteria on back) Make Check Payable to Department of State Trust Fund Contribution. Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 MUS ☐ Defele TITLE DAUE CORONEL, OCTAVIO G. Addition . NAME STREET ADDRESS 8954 NW 112 Street STREET ADDRESS CHY-ST-DIP <u> Hialeah Gardens, FL 33018</u> CITY-ST-ZIP THILE Delete DALAS Change Addissen STREET ADLIRESS STREET ADDRESS Official ST- ZP CITY-ST-ZIP Delete TITLE -114ME-☐ Addision NAME STREET ADDRESS STREET ADDRESS 0HY-ST-2IP CITY-ST-ZIP TITLE ☐ Delete TITLE HALTE ☐ Change Addition: NAME STREET ADDRESS STREET ADDRESS Q117 - 31 - 29° CITY-ST-ZIP Delete THILE Cuange 🔲 Addas: NAME STAREL ADDRESS STREET ADDRESS 347 - S1 - ZIP CITY-ST-ZIP 11: 5 ☐ Delete UTLE Change Adottion ! NAME STREET ADDRESS STREET ADDRESS 317 St- 22 CITY-ST-2IP 13. Thereby certify that ith this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 is with all other like appears in Block 11 or Block 12 is indicated on this report or of the corporation of the re uppleme changed, or on an SIGNATURE: 04-30-2002 ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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