

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J55588

1. Entity Name

MARGARITA ENTERPRISES, INC.

**FILED**  
**May 10, 2001 8:00 am**  
**Secretary of State**

05-10-2001 90132 016 \*\*\*150.00

Principal Place of Business

Mailing Address

5804 S.W. 72nd ST  
SO. MIAMI, FL 33143

5804 S.W. 72nd ST  
SO. MIAMI, FL 33143

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

59-2764290

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HENRY COURTNEY  
SUITE 3131  
201 S.W. BISCAYNE BLVD  
MIAMI, FL 33131

Name

HENRY COURTNEY

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

5804 S.W. 72nd STREET

City

SOUTH MIAMI

FL

Zip Code

33143

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]* HENRY COURTNEY

(NOTE: Registered Agent signature required when reinstating)

4/25/2001

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

TITLE: PRESIDENT  
NAME: MARGARITA COURTNEY  
STREET ADDRESS: 5151 PINE TALL DR.  
CITY-ST-ZIP: MIAMI, FL 33140 ☐ Delete

TITLE: ☐ Delete  
NAME: ☐ Delete  
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 or changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Margarita Courtney* MARGARITA COURTNEY 4/25/2001 305 6622663

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #