

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K30228

1. Entity Name

CONSOLIDATED FINANCIAL, INC.

FILED
Jan 14, 2000 8:00 am
Secretary of State

01-14-2000 90064 001 ***158.75

Principal Place of Business

7990 SW 117TH AVE
SUITE 137
MIAMI FL 33183
US

Mailing Address

7990 SW 117TH AVE
SUITE 137
MIAMI FL 33183-3845
US

2. Principal Place of Business

7990 SW 117 Ave

3. Mailing Address

Same

Suite, Apt. #, etc.

SUITE 135

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

4. FEI Number

65-0077084

Applied For

Not Applicable

Zip

33183

Country

USA

Zip

33183

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GARCIA, HECTOR
7990 SW 117TH AVE.
SUITE 137
MIAMI FL 33183

7. Name and Address of New Registered Agent

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

TITLE S ☐ Delete

NAME GARCIA, HECTOR
STREET ADDRESS 7990 SW 117 AVE 137
CITY-ST-ZIP MIAMI, FL 33183

TITLE P ☐ Delete

NAME GARCIA, HECTOR
STREET ADDRESS 3500 SW 112 PL
CITY-ST-ZIP MIAMI FL 33165

TITLE VP ☐ Delete

NAME GARCIA, HECTOR J.
STREET ADDRESS 7690 SW 117 AVE 137
CITY-ST-ZIP MIAMI FL 33183

TITLE VP ☐ Delete

NAME GARCIA, HECTOR
STREET ADDRESS 20215 SW 59 CT
CITY-ST-ZIP MIAMI FL

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE SECRETARY ☒ Change ☐ Addition

NAME CANDIDA GARCIA
STREET ADDRESS 7990 SW 117 AVE STE 135
CITY-ST-ZIP MIAMI, FL 33183

TITLE PRESIDENT ☒ Change ☐ Addition

NAME CANDIDA GARCIA
STREET ADDRESS 7990 SW 117 AVE STE 135
CITY-ST-ZIP MIAMI FL 33183

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NONE ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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:

Hector Garcia Vice. Pres

1-6-2000 (305) 5581321

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #