

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **K30424**

1. Entity Name
CRIS-CAR CORPORATION



APPROVED
AND
FILED

03 SEP -3 AM 11:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**1951 W. 60TH ST
HIALEAH FL 33012**

Mailing Address
**1951 W. 60TH ST
HIALEAH FL 33012**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0065866**

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

**RIVERA, CARLOS
6530 SW 8TH ST
PEMBROKE PINES FL 33023**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

Date

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	RIVERA, CARLOS	
STREET ADDRESS	6530 SW 8TH ST	
CITY-ST-ZIP	PEMBROKE PINES FL 33023	
TITLE	VD	<input type="checkbox"/> Delete
NAME	RIVERA, CRISTINA	
STREET ADDRESS	6530 SW 8TH ST	
CITY-ST-ZIP	PEMBROKE PINES FL 33023	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

000023521280
10/02/03--01081--018 **150.00

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cristina Rivera
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 2, 2003

Date

Daying Office

CR2E034 (10/02)

Attachment

282

#K30434

August 25th, 2003

Florida Department of State
Division of Corporation
P.O. Box 1500
Tallahassee, FL 32302-1500

CRIS-CAR CORPORATION

1951 W. 60th Street

Hialeah, FL 33012

Re: K30424

EIN: 65-0065866

Dear Sir or Madam,

I have contacted your organization regarding my companies UBR status for the year 2003 because I received your notice of delinquency. This lead me to verify whether the funds paid back in April with check 3865 had clear in the bank. After taking a look I noticed that check I sent had not been canceled. I advised one of your representatives that I sent my report along with payment back in the beginning of April. They advised me to send a letter along with the original fee of \$150.00. Please bring my company up to date. Enclosed are copies of the first check and UBR I sent in April along with check 3902 for \$150.00.

Sincerely,



Christina Rivera
President