2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 20, 2001 8:00 am Secretary of State DOCUMENT # **K33718** 1. Entity Name ELIAS FABRICS, INC. 04-20-2001 90002 026 ***150.00 Principal Place of Business Mailing Address 2000 EAST 4TH AVENUE 2000 EAST 4TH AVENUE HIALEAH FL 33010 HIALEAH FL 33010 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0080609 Not Applicable Zip Country 7in Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ELIAS, JORGE Street Address (P.O. Box Number is Not Acceptable) 2000 EAST 4TH AVENUE HIALEAH FL 33010 Zip Code City 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. 4/16/4 SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Delete ☐ Change ■ Addition TITLE TITLE ELIAS, JORGE NAME NAME STREET ADDRESS STREET ADDRESS 2000 EAST 4TH AVENUE CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33010 ☐ Change ☐ Addition ☐ Delete TITLE TITLE **ELIAS, SANTIAGO** NAME NAME STREET ADDRESS 2000 EAST 4TH AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-2IP HIALEAH FL 33010 ☐ Change TITLE Delete TITLE Addition TAMARGO, MARIA NAME NAME STREET ADDRESS STREET ADDRESS 2000 EAST 4TH AVENUE CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33010 TITLE ☐ Delete TITLE Change Addition SANTANA, MERCEDES NAME NAME

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.

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

TITLE

STREET ADDRESS

CITY-ST-ZIF

CITY-ST-ZIP

CITY-ST-71P

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS 2000 EAST 4TH AVENUE

HIALEAH FL 33010

SIGNATURE AND TYPED OR PHYSTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Delete

4/16/4 30/117-064

Change

☐ Change

☐ Addition

☐ Addition

CR2E034 (10/00)