

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K50262

1. Entity Name

SOSA-LEON INVESTMENTS, CORP.

Principal Place of Business

~~0400 SW 35 ST~~
~~MIAMI FL 33145 3942~~

Mailing Address

~~0400 SW 35 ST~~
~~MIAMI FL 33145 3942~~

2. Principal Place of Business

11470 S.W. 40th. St.

3. Mailing Address

11470 S.W. 40th. St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, Fl

City & State

Miami, Fl.

Zip

33165

Country

USA

Zip

33165

Country

USA

6. Name and Address of Current Registered Agent

JESUS M CABRERA
120 W 30 ST
HALEAH FL 33012

7. Name and Address of New Registered Agent

Name
RANGEL, Julio F.
Street Address (P.O. Box Number is Not Acceptable)
11470 S.W. 40th. St.

City
Miami

FL

Zip Code
33165

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

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

Julio F. Rangel

02/01/01

(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, 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	PSD	<input checked="" type="checkbox"/> Delete
NAME	CABRERA JESUS M	
STREET ADDRESS	120 W 30 ST	
CITY-ST-ZIP	HALEAH FL 33012	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RANGEL, Julio F.	
STREET ADDRESS	11470 S.W. 40 St.	
CITY-ST-ZIP	Miami, Fl. 33165	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RANGEL, Concepcion M.	
STREET ADDRESS	11470 S.W. 49 St.	
CITY-ST-ZIP	Miami, Fl. 33165	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Julio F. Rangel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JULIO F. RANGEL
PRESIDENT

02/01/01

Date

305 223-5169
305-261-1905
Daytime Phone #

FILED
Feb 19, 2001 8:00 am
Secretary of State

02-19-2001 90039 038 ***150.00

CU022310



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)