

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K57262.

1. Entity Name
BRACO, INC.

FILED
Mar 27, 2001 8:00 am
Secretary of State

03-27-2001 90656 041 ***150.00

Principal Place of Business

C/O BARRY N. SEMET
100 S.E. 2ND ST. 17TH FL
MIAMI FL 33131

Mailing Address

C/O BARRY N. SEMET
100 S.E. 2ND ST. 17TH FLOOR
MIAMI FL 33131

00000410



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0092950

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SEMET, BARRY N
100 S.E. 2ND ST.
FLOOR 17
MIAMI FL 33131

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, 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 DP ☐ Delete
NAME DELIMA, MILDRED
STREET ADDRESS 3500 MYSTIC PINTE DR., #1208
CITY-ST-ZIP AVENTURA FL 33180

TITLE DVP ☐ Delete
NAME DELIMA, JAIME
STREET ADDRESS 3500 MYSTIC POINTE DR #1208
CITY-ST-ZIP AVENTURA FL 33180

TITLE DST ☐ Delete
NAME DE LIMA, LINDA
STREET ADDRESS 3500 MYSTIC POINTE DR #1208
CITY-ST-ZIP AVENTURA FL 33180

TITLE D ☐ Delete
NAME DELIMA, RENE
STREET ADDRESS 3500 MYSTIC POINTE DR #1208
CITY-ST-ZIP AVENTURA FL 33180

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 DP ☒ Change ☐ Addition
NAME DELIMA, MILDRED
STREET ADDRESS 100 S.E. 2ND ST - 17TH FLOOR
CITY-ST-ZIP MIAMI, FLORIDA 33131

TITLE DVP ☒ Change ☐ Addition
NAME DELIMA, JAIME
STREET ADDRESS 100 S.E. 2ND ST - 17TH FLOOR
CITY-ST-ZIP MIAMI, FLORIDA 33131

TITLE DST ☒ Change ☐ Addition
NAME DELIMA, LINDA
STREET ADDRESS 100 S.E. 2ND ST - 17TH FLOOR
CITY-ST-ZIP MIAMI, FLORIDA 33131

TITLE D ☒ Change ☐ Addition
NAME DELIMA, RENE
STREET ADDRESS 100 S.E. 2ND ST - 17TH FLOOR
CITY-ST-ZIP MIAMI, FLORIDA 33131

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: *Mildred Delima* MILDRED DELIMA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARCH 10, 2001

Date

305-935-6038

Daytime Phone #

CR2E034 (10/00)