

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90375 001 ***300.00

DOCUMENT # L03761

1. Entity Name
BARRERA STUDIO, INC.



Principal Place of Business

**13951 SW 66TH ST
906 A
MIAMI FL 33183
US**

Mailing Address

**6661 SW 137 CT.
UNIT A
MIAMI FL 33183**

2. Principal Place of Business

**1001 SW 147 AVE #
Suite, Apt. #, etc.
K-107**

3. Mailing Address

Suite, Apt. #, etc.

City & State

PEMBROKE PINES, FL

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0139660

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**POWER, RAMON
6661 SW 137TH COURT
UNIT A
MIAMI FL 33176**

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. 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

TITLE **PD** ☐ Delete
NAME **BARRERA, ERNESTO D.**
STREET ADDRESS **13951 KENDALE LAKES CIR**
CITY-ST-ZIP **MIAMI FL**

TITLE **STD** ☐ Delete
NAME **BARRERA, PILAR A.**
STREET ADDRESS **13951 KENDALE LAKES CIR**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1001 SW 147 AVE. K-107**
CITY-ST-ZIP **PEMBROKE PINES, FL 33027**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1001 SW 147 AVE K-107**
CITY-ST-ZIP **PEMBROKE PINES, FL 33027**

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Ernesto D. Barrera
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/03

Date

954-704-1807

Daytime Phone #

CR2E034 (10/02)