

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L38449

1. Entity Name

FLORES ENTERPRISE INC.

FILED
Jan 27, 2000 8:00 am
Secretary of State

01-27-2000 90072 036 ***150.00

Principal Place of Business

14524 SW 76 ST
MIAMI FL 33183
US

Mailing Address

14524 SW 76 ST
MIAMI FL 33183-2910
US

2. Principal Place of Business

P.O. Box 960663

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 960663

Suite, Apt. #, etc.

City & State
Miami, Florida

City & State
Miami, Florida

4. FEI Number 65-0257750

Applied For

Not Applicable

Zip 33296-0663

Country USA

Zip 33296-0663

Country USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FLORES, NORA M.
14524 SW 76 ST
MIAMI FL 33183

7. Name and Address of New Registered Agent

Name
Ralph Flores
Street Address (P.O. Box Number is Not Acceptable)
14524 SW 76th Street
City Miami FL Zip Code 33183

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 Ralph Flores Ralph Flores 1/18/2000

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, 2000 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 VDT
NAME FLORES, RALPH
STREET ADDRESS 14524 SW 76 ST
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE PSD
NAME FLORES, NORA M.
STREET ADDRESS 14524 SW 76 ST
CITY-ST-ZIP MIAMI FL ☐ Delete

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P,V,T,S,D
NAME Ralph Flores
STREET ADDRESS 14524 SW 76th Street
CITY-ST-ZIP Miami, FL 33183 ☒ Change ☐ Addition

TITLE D
NAME Nora M. Flores
STREET ADDRESS 14524 SW 76th Street
CITY-ST-ZIP Miami, FL 33183 ☒ Change ☐ Addition

TITLE ☐ Change ☒ Addition
NAME Henry E. Flores
STREET ADDRESS 14524 SW 76th Street
CITY-ST-ZIP Miami, FL 33183

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

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: Ralph Flores Ralph Flores VP. 1/18/2000 305-279-5422

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #