

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90064 006 ***150.00

DOCUMENT # L42780

1. Entity Name

M.G.E. Sales & Rental Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2141 SW 1 Street

3. Mailing Address

Same

Suite, Apt. #, etc.

#211

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Zip

33135

Country

USA

Zip

Country

4. FEI Number

592986025

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Rosa Chavez

Street Address (P.O. Box Number is Not Acceptable)

2141 SW 1 Street #211

City

Miami

FL

Zip Code

33135

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

Rosa Chavez

Signature, typed or printed name of registered agent and file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/25/02

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

NAME

STREET ADDRESS

CITY - ST - ZIP

P/S/T

Rosa Chavez

2141 SW 1 Street

Miami, FL 33135

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Rosa Chavez

Rosa Chavez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02

Date

786-269-9522

Daytime Phone #