

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90007 001 ***150.00

DOCUMENT # L81685

1. Entity Name
FRONSA CORP.

Principal Place of Business
% ALFRED BLANCO. JR.
16 SEVILLA AVENUE
CORAL GABLES FL 33134-6117

Mailing Address
% ALFRED BLANCO. JR.
16 SEVILLA AVENUE
CORAL GABLES FL 33134-6117

2. Principal Place of Business
4250 Ingraham Highway
Suite, Apt. #, etc.

3. Mailing Address
4250 Ingraham Highway
Suite, Apt. #, etc.

City & State
Miami, Florida

City & State
Miami, Florida

4. FEI Number **65-0208859**

Applied For
Not Applicable

Zip **33133-6718** Country **U.S.A.**

Zip **33133-6718** Country **U.S.A.**

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLANCO, ALFREDO, JR
16 SEVILLA AVE.
CORAL GABLES FL 33134

Name
BLANCO, Alfredo, Jr.
Street Address (P.O. Box Number is Not Acceptable)
4250 Ingraham Highway
City **Miami** FL Zip Code **33133-6718**

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 *Alfredo Blanco* - PD

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Delete
NAME **BLANCO, ALFREDO JR**
STREET ADDRESS **16 SEVILLA AVE.**
CITY-ST-ZIP **CORAL GABLES FL**

TITLE **PD** ☒ Change ☐ Addition
NAME **BLANCO, Alfredo Jr.**
STREET ADDRESS **4250 Ingraham Highway**
CITY-ST-ZIP **Miami, FL 33133-6718**

TITLE **SD** ☒ Delete
NAME **BLANCO, LIANA MARIA**
STREET ADDRESS **16 SEVILLA AVE.**
CITY-ST-ZIP **CORAL GABLES FL**

TITLE **SD** ☒ Change ☐ Addition
NAME **BLANCO, Liana Maria**
STREET ADDRESS **4250 Ingraham Highway**
CITY-ST-ZIP **Miami, FL 33133-6718**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ 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: *Alfredo Blanco* - Alfredo BLANCO. JR. - PD - January 23, 2001 - (305)666-9025
- (305)666-6553

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)