

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2003 8:00 am
Secretary of State

07-10-2003 90114 031 ***150.00

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DOCUMENT # L85362

1. Entity Name

MOUNTAIN CHIEF, INC.

①



Principal Place of Business

% JUAN GONZALEZ

2401 COLLINS AVE

MIAMI BEACH FL 33140

Mailing Address

% JUAN GONZALEZ

2401 COLLINS AVE

MIAMI BEACH FL 33140



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

2985 NE 163RD ST

3. Mailing Address

2985 NE 163RD ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

N.M. BEACH

City & State

N.M. BEACH

4. FEI Number

65-0203980

Applied For

Not Applicable

Zip

33160

Country

USA

Zip

33160

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, JUAN

2401 COLLINS AVE

MIAMI BEACH FL 33140

7. Name and Address of New Registered Agent

Name

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

2985 NE 163RD ST

City N.M. BEACH

FL

Zip Code

33160

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 \$550.00

After September 10, 2003 Fee will be \$750.00

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 ☐ Delete

NAME D
STREET ADDRESS GONZALEZ, JUAN
CITY-ST-ZIP 2401 COLLINS AVE
MIAMI BEACH FL

TITLE ☐ Delete

NAME DPTS
STREET ADDRESS GONZALEZ, JUAN
CITY-ST-ZIP 2401 COLLINS AVE
MIAMI FL 33140

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 2985 NE 163RD ST
STREET ADDRESS N.M. BEACH FL 33160
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME 2985 NE 163RD ST
STREET ADDRESS N.M. BEACH FL 33160
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)