

2001 UNIFORM BUSINESS REPORT (UBR) *AMENDED*

DOCUMENT # **L87788**

1. Entity Name
GROUP II OF MIAMI, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

01 DEC 17 PM 4:07

Principal Place of Business

Mailing Address

**8500 SW 8 ST
STE 222
MIAMI FL 33144
US**

**8500 SW 8 ST
STE 222
MIAMI FL 33144
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0321042**

Applied For

Not Applicable

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

**VALDERRAMA, CARLOS A.
8500 SW 8 ST
SUITE 222
MIAMI FL 33144**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 **P** ☐ Delete
NAME **VALDERRAMA, CARLOS A.**
STREET ADDRESS **8500 SW 8 ST STE 222**
CITY-ST-ZIP **MIAMI FL 33144**

TITLE **V** ☐ Delete
NAME **VALDERRAMA, L I**
STREET ADDRESS **8500 SW 8 ST STE 222**
CITY-ST-ZIP **MIAMI FL 33144**

TITLE **V** ☒ Delete
NAME **VALDERRAMA, JAVIER A**
STREET ADDRESS **8500 SW 8 ST, STE 222**
CITY-ST-ZIP **MIAMI FL 33144** *Effective 8/1/01*

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 ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
**000004729440--0
-12/17/01--01097--001
****183.75 *****61.25**

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

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

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

**PAID
APR 30 2001
BY: CUB-1137**

13. I hereby certify that the information supplied with this filing does comply 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 any reports 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/01
Date

305-266-5935
Daytime Phone #

**RESIGNATION OF
DIRECTORS AND/OR OFFICERS
OF**

GROUP II OF MIAMI, INC.

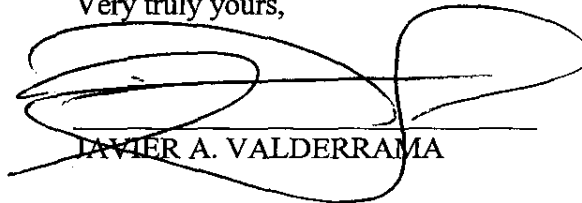
Board of Directors

Gentlemen:

Please be advised that, effective immediately, I, JAVIER A. VALDERRAMA, have resigned my position as Director and Officer of GROUP II OF MIAMI, INC.

DATED: August 1, 2001

Very truly yours,



JAVIER A. VALDERRAMA

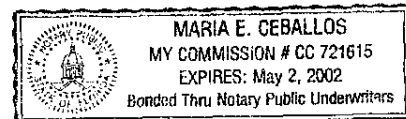
STATE OF FLORIDA)

:SS

COUNTY OF DADE)

The foregoing instrument was acknowledged before me this 1ST day of August, 2001, by Javier A. Valderrama, N/A (Title) of N/A, a Florida corporation, on behalf of said corporation.


NOTARY PUBLIC, State of Florida at Large
NOTARY: _____
My Commission _____



Personally Known ____ OR Produced Identification ____
Type of Identification Produced: _____