

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000003044

1. Entity Name

CHIA IMPORTS, INC. L.C.
19380 COLLINS AVE #1617
MIAMI, FL 33160-2457

Principal Place of Business
19380 COLLINS AVE #1617
MIAMI, FL 33160-2457

Mailing Address
C/O BLAKESBERG & COMPANY CPAS
951 SW 4TH AVENUE
BOCA RATON, FL 33432-5803

FILED

00 JUN 15 PM 4:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

8323 NW 12th STREET #102
Suite, Apt. #, etc.
102

3. Mailing Address

Suite, Apt. #, etc.

City & State

MIAMI, FL 33126

City & State

Zip

USA

Country

4. FEI Number

65- 0880973

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ANDRES CARRIZOSA
8323 NW 12TH STREET #102
MIAMI, FL 33126

7. Name and Address of New Registered Agent

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

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 MGRM ☒ Delete
NAME THESE CHOICES & CO S
STREET ADDRESS 9200 S DADELAND BLVD #603
CITY-ST-ZIP MIAMI, FL 33156

TITLE MGRM ☒ Delete
NAME INGENIERIAS ASOCIADA
STREET ADDRESS 9200 S DADELAND BLVD#603
CITY-ST-ZIP MIAMI, FL 33156

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 PRESIDENT ☐ Change ☒ Addition
NAME ANDRES CARRIZOSA, MGRM
STREET ADDRESS 5741 NW 112AVE #108
CITY-ST-ZIP MIAMI, FL 33178

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

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

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANDRES CARRIZOSA

04/11/00

Date

Daytime Phone #