

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Feb 13, 2001 8:00 am**  
**Secretary of State**

02-13-2001 90058 050 \*\*\*150.00

**DOCUMENT # M21735**

1. Entity Name

**LARK REALTY, INC.**

Principal Place of Business

**15101 SW 71ST COURT  
MIAMI FL 33158  
US**

Mailing Address

**15101 SW 71ST COURT  
MIAMI FL 33158  
US**

2. Principal Place of Business

**5015 SW 88 St**

Suite, Apt. #, etc.

3. Mailing Address

**5015 SW 88 St**

Suite, Apt. #, etc.

City & State

**MIAMI FL**

City & State

**MIAMI FL**

Zip

**33156**

Country

**U.S.**

Zip

**33156**

Country

**U.S.**

4. FEI Number

**59-2586610**

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**GARAY, PEDRO  
15101 S.W. 71ST COURT  
MIAMI FL 33158**

7. Name and Address of New Registered Agent

Name

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

**5015 SW 88 St**

**MIAMI**

City

**FL**

Zip Code

**33156**

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, 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

TITLE **DP** ☐ Delete  
NAME **GARAY, PEDRO**  
STREET ADDRESS **15101 S.W. 71 CT**  
CITY-ST-ZIP **MIAMI FL**

TITLE **D** ☐ Delete  
NAME **GARAY, MARTHA**  
STREET ADDRESS **15101 S.W. 71 CT.**  
CITY-ST-ZIP **MIAMI FL**

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 ☐ Change ☐ Addition  
NAME  
STREET ADDRESS **5015 SW 88 St**  
CITY-ST-ZIP **MIAMI, FL 33156**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS **5015 SW 88 St**  
CITY-ST-ZIP **MIAMI, FL 33156**

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

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: *Pedro Garay*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Pedro Garay Pres. 2/8/01 305 661 7014**

Date

Daytime Phone #

CR2E034 (10/00)