

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90232 007 ***150.00

DOCUMENT # M23513

1. Entity Name
GENIE INTERIORS, INC.

Principal Place of Business

**7172 SW 47TH ST
 MIAMI FL 33155**

Mailing Address

**7172 SW 47TH ST
 MIAMI FL 33155**

2. Principal Place of Business

7172 SW 47 ST

Suite, Apt. #, etc.

3. Mailing Address

7172 SW. 47 ST

Suite, Apt. #, etc.

MIAMI FL.

City & State

MIAMI, FL

City & State

4. FEI Number **59-2618148**

Applied For

Not Applicable

Zip

33155

Country

Zip

33155

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

MORALES, ROGER

10164 SW 139 PL

MIAMI FL 33186

**1511 MATARO AVE
 CORAL GABLES
 33146.**

7. Name and Address of New Registered Agent

Name **ROGER MORALES**

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

1511 MATARO AVE

CORAL GABLES, 33146

City

CORAL GABLES,

FL

Zip Code

33146

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 **PD** ☐ Delete
 NAME **MORALES, ROGER**
 STREET ADDRESS **10164 SW 139 PL**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE **D** ☐ Delete
 NAME **MORALES, HADA MA**
 STREET ADDRESS **10164 SW 139 PL**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 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
 CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
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 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:

ROGER MORALES - **4/13/01** (305) 667-0929

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)