

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 03, 2002 8:00 am**  
**Secretary of State**

09-03-2002 90116 047 \*\*\*150.00

**DOCUMENT # M26305**

1. Entity Name  
**LANDY CORP.**

Principal Place of Business

**56515 W 88 AVE  
MIAMI FL 33173**

Mailing Address

**56515 W 88 AVE  
MIAMI FL 33173**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-1353188**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GARCIA, MAGGIE  
56515 W 88 AVE  
MIAMI FL 33173**

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. 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

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 \$550.00  
After September 13, 2002 Fee will be \$750.00  
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 **PS** ☐ Delete  
NAME **GARCIA, MAGGIE**  
STREET ADDRESS **5651 S.W. 88 AVE.**  
CITY-ST-ZIP **MIAMI FL 33173**

TITLE **T** ☐ Delete  
NAME **RAMIREZ, YUCELIN S**  
STREET ADDRESS **11945 SW 7TH ST.**  
CITY-ST-ZIP **MIAMI FL 33184**

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  
CITY-ST-ZIP

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

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

Date

Daytime Phone #

CR2E034 (4/02)

*Attachment*  
*# M26305/677504*

LANDY CORP  
5651 SW 88 AVENUE  
MIAMI, FLORIDA 33173

August 27, 2002

Division of Corporations  
Uniform Business Report Filings  
P. O. Box 1500  
Tallahassee, Florida 32302-1500

Re: 2002 UNIFORM BUSINESS REPORT  
Document #M26305

Dear Sir/Madam:

Enclosed please find a check in the amount of \$150.00.  
Please be advised that this was the first notice received.  
A copy of the original envelope with the wrong address is  
herewith enclosed for your reference.

We kindly request that you correct the address as follows:

LANDY CORP.  
5651 SW 88 AVENUE  
MIAMI, FLORIDA 33173

Thank you for your cooperation.

Sincerely,

*Maggie Garcia*  
MAGGIE GARCIA  
President