

2001 UNIFORM BUSINESS REPORT (UBR)

0153562

DOCUMENT # M43162

1. Entity Name

GATERIA FLORIDA, INC.

Principal Place of Business

% PEDRO A. MARTIN. ESQ.
1221 BRICKELL AVENUE, 24TH FLOOR
MIAMI FL 33131

Mailing Address

% PEDRO A. MARTIN. ESQ.
1221 BRICKELL AVENUE, 24TH FLOOR
MIAMI FL 33131

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

MARTIN, PEDRO A ESQ.
GREENBERG, TRAUIG, ET AL
1221 BRICKELL AVENUE, 24TH FLOOR
MIAMI FL 33131

4. FEI Number 59-2804139

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

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, 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
NAME JASSIR, ABDALA SAIEH
STREET ADDRESS 1405 S.W. 107TH AVENUE, SUITE 301-B
CITY-ST-ZIP MIAMI FL 33174 ☐ Delete

TITLE DVS
NAME JASSIR, LUIS SAIEH
STREET ADDRESS 1405 S.W. 107TH AVENUE, SUITE 301-B
CITY-ST-ZIP MIAMI FL 33174 ☐ Delete

TITLE D
NAME SAIEH, CARLOS
STREET ADDRESS NINE ISLAND AVENUE, UNIT 1411
CITY-ST-ZIP MIAMI BEACH FL 33139 ☐ Delete

TITLE DVT
NAME MUVDI, MOISES SAIEH
STREET ADDRESS 1405 S.W. 107TH AVENUE, SUITE 301-B
CITY-ST-ZIP MIAMI FL 33174 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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 another like empowered.

SIGNATURE:

Luis Saieh Jassir

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

01 APR 27 PM 12:09

SECRETARY OF STATE
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

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***158.75 ☐ Change ☐ Addition

[Handwritten Signature]

4-9-01