

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

Amended FILED

DOCUMENT # M 57727

1. Entity Name

LAZO CYLINDER HEAD CORP.

Yr 2004 PM 1:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1753 N.W. 23 ST.

Suite, Apt. #, etc.

3. Mailing Address

1753 N.W. 23 ST.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

4. FEI Number

59-2346439

Applied For

Not Applicable

Zip

33142

Country

U.S.A.

Zip

33142

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

OROSMEL LAZO

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

1620 S.W. 9 Street

City

MIAMI

FL

Zip Code

33125

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

OROSMEL LAZO

5/31/02
DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25

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	NAME	STREET ADDRESS	CITY-ST-ZIP
PRESIDENT	OROSMEL LAZO	1620 S.W. 9 Street	MIAMI, FL. 33135
VICE-PRESIDENT	AGUSTIN LAZO	1620 S.W. 9 Street	MIAMI, FL. 33135
SECRETARY/TREASURER	MARTA LAZO	1620 S.W. 9 Street	MIAMI, FL. 33135

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 on an attachment with an address, with all other like empowered.

SIGNATURE