

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2001 8:00 am
Secretary of State
 05-02-2001 90087 001 ****61.25

DOCUMENT # N00000003729

1. Entity Name

BETTER FUTURE, INC.

Principal Place of Business

12374 N.W. 98TH PLACE
 HIALEAH GARDENS FL 33018

Mailing Address

12374 N.W. 98TH PLACE
 HIALEAH GARDENS FL 33018

2. Principal Place of Business

7000 W 12 AVE

3. Mailing Address

7000 W 12 AVE

Suite, Apt. #, etc.

Suite 18

Suite, Apt. #, etc.

Suite 18

City & State

Hialeah, FL

City & State

Hialeah, FL

Zip

33014

Country

US

Zip

33014

Country

US

4. FEI Number

65-1015282

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

HERNANDEZ, IVAN
 12374 N.W. 98TH PLACE
 HIALEAH GARDENS FL 33018

7. Name and Address of New Registered Agent

Name **JUAN CARLOS SOCORRO**

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

8090 NW 105T #3

City **MIAMI FL**

FL

Zip Code

33126

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.

JUAN CARLOS SOCORRO

(NOTE: Registered Agent signature required when reinstating)

DATE

4-17-01

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **HERNANDEZ, IVAN**
 STREET ADDRESS **12374 N.W. 98TH PLACE**
 CITY-ST-ZIP **HIALEAH GARDENS FL 33018**

TITLE **D** ☐ Delete
 NAME **VALDES, MANUEL**
 STREET ADDRESS **12374 N.W. 98TH PLACE**
 CITY-ST-ZIP **HIALEAH GARDENS FL 33018**

TITLE **D** ☐ Delete
 NAME **AMADOR, MARIANELA**
 STREET ADDRESS **12374 N.W. 98TH PLACE**
 CITY-ST-ZIP **HIALEAH GARDENS FL 33018**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Director** ☐ Change ☒ Addition
 NAME **JUAN CARLOS SOCORRO**
 STREET ADDRESS **8090 NW 105T #3**
 CITY-ST-ZIP **MIAMI, FL 33126**

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

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JUAN CARLOS SOCORRO
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-01 305815-1674

Date

Daytime Phone #

CR2E037 (10/00)