

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 18, 2001 8:00 am**  
**Secretary of State**

07-18-2001 90257 012 \*\*\*\*61.25

**DOCUMENT # N35935**

1. Entity Name

**PUERTO RICANS IN FLORIDA, INC.**

*(LA)*

Principal Place of Business 1695 FLORIDA MANGO RD 3 WEST PALM BEACH FL 33406 US		Mailing Address 1695 FLORIDA MANGO RD 3 WEST PALM BEACH FL 33406 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

**AUU77333**



DO NOT WRITE IN THIS SPACE

4. FEI Number <b>59-2960881</b>		Applied For	
		Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<p><b>MIQUEL</b>  <del>MANEL</del>, ALBERTO          1695 FLORIDA MANGO RD.          SUITE 3          WEST PALM BEACH FL 33406</p>		<p>Name _____          Street Address (P.O. Box Number is Not Acceptable) _____          City _____ <b>FL</b> Zip Code _____</p>	

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW: FEE IS \$61.25</b> After September 12, 2001, min. will be \$236.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>TIRADO, NANCY</b> <b>4653 SPRUCE LN</b> <b>WEST PALM BEACH FL 33418</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>DANNY COLL.</b> <b>5042 CROSS POINT DR</b> <b>OWASMAVA FL 34677</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>POWER, ROBERT</b> <b>1114 BYERLY WAY</b> <b>ORLANDO FL 32818</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ALBERTO MIQUEL</b> <b>1695 FLORIDA MANGO RD STE 3</b> <b>WEST PALM BCH FL</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>DILL, GILDA</b> <b>825 HARBOR ISLAND</b> <b>CLEARWATER FL 34630</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>IRIS LEDESMA</b> <b>1315 SASSAFRAS AVE.</b> <b>ALTAMONTE SPRINGS, FL 32714</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>VIERA, DENNIS</b> <b>15011 REDCLIFF DRIVE</b> <b>TAMPA FL 33625</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: SIGNATURE REQUIRED **07-03-01 (56) 916-0998**

CR2E037 (5/01)