

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90132 008 ***150.00

12/14/02 AV

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1. Entity Name
FANY CORP.



Principal Place of Business

6769 SW 104 COURT
MIAMI FL 33186

12941 SW 117 ST

Mailing Address

6769 SW 104 COURT
MIAMI FL 33186

12941 SW 117 ST

2. Principal Place of Business

12941 SW 117 ST 33186
Suite, Apt. #, etc.

3. Mailing Address

12941 SW 117 ST 33186
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number

65-0971710

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASTELLANOS, EMELINO

6769 SW 104 COURT
MIAMI FL 33186

Castellanos
Emelino
12941 SW 117 ST
Miami FLA 33186

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME CASTELLANOS, EMELINO
STREET ADDRESS 12941 SW 117 ST
CITY-ST-ZIP MIAMI FL 33186

TITLE D
NAME Emelino Castellanos
STREET ADDRESS 12941 SW 117 ST
CITY-ST-ZIP MIAMI FLA 33186

TITLE D
NAME CASTELLANOS, EMELINO
STREET ADDRESS 6769 SW 104 COURT
CITY-ST-ZIP MIAMI FL 33173

TITLE D
NAME Emelino Castellanos
STREET ADDRESS 12941 SW 117 ST
CITY-ST-ZIP MIAMI FLA 33186

TITLE D
NAME ARLEEN, GAMAZO
STREET ADDRESS 6231 SW 151 PLACE
CITY-ST-ZIP MIAMI FL 33193

TITLE D
NAME Arleen Gamazo
STREET ADDRESS 6231 SW 151 PL
CITY-ST-ZIP MIAMI FLA 33193

TITLE D
NAME LEONIDES, CASTELLANOS
STREET ADDRESS 6231 SW 151 PLACE
CITY-ST-ZIP MIAMI FL 33173

TITLE D
NAME Leonides Castellanos
STREET ADDRESS 6231 SW 151 PL
CITY-ST-ZIP MIAMI FLA 33193

TITLE D
NAME SELSO, GAMAZO
STREET ADDRESS 6231 SW 151 PLACE
CITY-ST-ZIP MIAMI FL 33193

TITLE D
NAME Selsa Gamazo
STREET ADDRESS 6231 SW 151 PL
CITY-ST-ZIP MIAMI FLA 33186

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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 607, 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)