

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

FILED

02 JUN 24 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P000000014138**

1. Entity Name

Kreateck International Corp

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8041 NW 156 Terr

3. Mailing Address

8041 NW 156 Terr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI LAKES FL

City & State

MIAMI LAKES FL

Zip

33016

Country

USA

Zip

33016

Country

USA

4. FEI Number

65-0999245

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Rocio Coronado

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

8041 NW 156 Terr

City

MIAMI

FL

Zip Code

33016

**DO NOT WRITE
IN THIS SPACE**

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

06-11-02

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	D Rocio Coronado 8041 NW 156 Terr MIAMI LAKES FL 33016	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Luis S. Coronado 8041 NW 156 Terr MIAMI LAKES FL 33016	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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:

06-11-02

(305) 822 3991

CR2E034B (12/01)