

FROM : 0

PHONE NO. : 305 559 4094

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2002 8:00 am
Secretary of State

07-25-2002 90125 047 ***150.00

DOCUMENT # P00000015874

1. Entity Name:

SALES & PEREZ CORPORATION ✓

DO NOT WRITE IN THIS SPACE

B0132242

2. Principal Place of Business

1455 Martinique Court

3. Mailing Address

1455 Martinique Court

Suite, Apt., etc.

#6508

Suite, Apt., etc.

#6508

City & State

Weston, FL 33326

City & State

Weston, FL

4. FEI Number

52-2217340

Applied For

Not Applicable

Zip

33326

Country

USA

Zip

33326

Country

USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name
RICARDO PEREZ

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

1455 Martinique Court #6508

City
Weston

FL

Zip Code
33326DO 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 of Registered Agent required unless waived)

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

NAME D RICARDO PEREZ	TITLE NAME RICARDO PEREZ
STREET ADDRESS 1455 Martinique Court #6508	STREET ADDRESS
CITY-STATE-ZIP Weston, FL 33326	CITY-STATE-ZIP
NAME	TITLE NAME
STREET ADDRESS	STREET ADDRESS
CITY-STATE-ZIP	CITY-STATE-ZIP
NAME	TITLE NAME
STREET ADDRESS	STREET ADDRESS
CITY-STATE-ZIP	CITY-STATE-ZIP
NAME	TITLE NAME
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CITY-STATE-ZIP	CITY-STATE-ZIP
NAME	TITLE NAME
STREET ADDRESS	STREET ADDRESS
CITY-STATE-ZIP	CITY-STATE-ZIP

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)(b), Florida Statutes. I further certify that the information supplied is true and correct to the best of my knowledge and belief, and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation.

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUL 22, 2002

Attachment

FELIPE R. RUIZ

CERTIFIED PUBLIC ACCOUNTANT
CERTIFIED FAMILY MEDIATOR
8390 WEST FLAGLER STREET, SUITE 219
MIAMI, FL 33144
TEL: (305) 552-9048
FAX: (305) 559-4094
EMAIL: FRUIZCPA@AOL.COM

P00000015874

July 3, 2002

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Sales & Perez Corporation
Doc #: P00000015874

Enclosed is a Uniform Business Report for the above referenced Corporation, and a check for \$150.00 payable to Department of State covering the required fees.

Please note that the taxpayer moved and never receive the original copy, accept this photocopy as an original return.

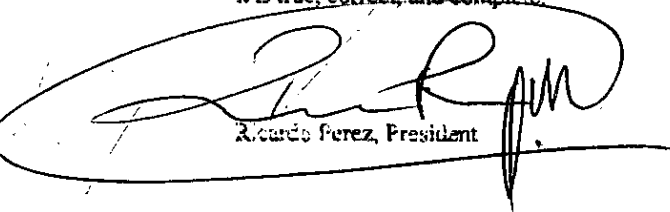
If you need any additional information regarding this matter feel free to call.

Sincerely yours,



Felipe R. Ruiz

Under penalty of perjury, I declare that I have examined the above statement including Accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.



Ricardo Perez, President