

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000022198

1. Entity Name

CREACIONES SUBLIM, INC.

Principal Place of Business

951 NW 128TH AVENUE
MIAMI FL 33182

Mailing Address

951 NW 128TH AVENUE
MIAMI FL 33182

2. Principal Place of Business

MIAMI, FLORIDA
Suite, Apt. #, etc.

3. Mailing Address

12834 NW 9th TERRACE
Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

4. FEI Number

650987800

Applied For

Not Applicable

Zip

Country

Zip

Country

33182

U.S.A.

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LOPEZ, GLADYS E
951 NW 128TH AVENUE
MIAMI FL 33182

7. Name and Address of New Registered Agent

Name: LOPEZ, Gladys E.
Street Address (P.O. Box Number is Not Acceptable): 12834 NW 9th TERRACE
City: MIAMI FL Zip Code: 33182

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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	PRESIDENT	<input type="checkbox"/> Delete
NAME	ENRIQUE HERNANDEZ	
STREET ADDRESS	12834 NW 9th TERRACE	
CITY-ST-ZIP	MIAMI, FL 33182	
TITLE	VICE-PRES.	<input type="checkbox"/> Delete
NAME	ANA JAMES	
STREET ADDRESS	12834 NW 9th TERRACE	
CITY-ST-ZIP	MIAMI, FL 33182	
TITLE	TREASURER	<input type="checkbox"/> Delete
NAME	GLADYS E. LOPEZ	
STREET ADDRESS	12834 NW 9th TERRACE	
CITY-ST-ZIP	MIAMI, FL 33182	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Signature and typed or printed name of signing officer or director: ENRIQUE HERNANDEZ - PRESIDENT 4/17/01 (305) 220-5778

FILED
May 17, 2001 8:00 am
Secretary of State

04-24-2001 90056 048 ***150.00

43928



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)