

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90068 045 ***150.00

DOCUMENT # P00000022633

1. Entity Name
MARENAS INTERNATIONAL BROKERS, INC.



Principal Place of Business

~~7870 N.W. 148T~~
~~MIAMI FL 33126~~

Mailing Address

~~9300 SOUTH DADELAND BLVD. SUITE 400~~
~~MIAMI FL 33156~~

10069755



2. Principal Place of Business

8074 NW 66 St.

Suite, Apt. #, etc.

3. Mailing Address

9200 S. Dadeland Blvd.

Suite, Apt. #, etc.

517

City & State
Miami, FL

City & State
Miami, FL

4. FEI Number **65-1024244**

Applied For

Not Applicable

Zip
33166

Country
U.S.A.

Zip
33156

Country
U.S.A.

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

KAPLAN, LINDA M

~~9300 SOUTH DADELAND BLVD. SUITE 400~~
~~MIAMI FL 33156~~

9200 S. Dadeland
Suite 517
Miami, FL 33156

Name **JORGE ARENAS**

Street Address (P.O. Box Number is Not Acceptable)
8074 NW 66 ST

City **MIAMI** **FL** **Zip Code** **33166**

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 **JORGE ARENAS PRESIDENT**

4/8/03

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 ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTD** ☐ Delete
NAME **ARENAS P., JORGE**
STREET ADDRESS **10357 SW 9 TERRACE**
CITY-ST-ZIP **MIAMI FL 33174**

TITLE **PTD** ☒ Change ☐ Addition
NAME **ARENAS P. JORGE**
STREET ADDRESS **8074 NW 66 ST**
CITY-ST-ZIP **MIAMI FL 33166**

TITLE **VSD** ☐ Delete
NAME **MURILLO, GINI**
STREET ADDRESS **10357 SW 9 TERRACE**
CITY-ST-ZIP **MIAMI FL 33174**

TITLE **VSD** ☒ Change ☐ Addition
NAME **MURILLO GINI**
STREET ADDRESS **8074 NW 66 ST**
CITY-ST-ZIP **MIAMI FL 33166**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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: Jorge Arenas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-08-03 **786-6715660**
Date **Daytime Phone #**

CR2E034 (10/02)