2001 UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED Jun 20, 2001 8:00 am DOCUMENT # P00000029108 **Secretary of State** 1. Entity Name 06-20-2001 90014 005 ***158.75 LIT LIGHTING, INC. Principal Place of Business Mailing Address 11382 NW 65 STREET 11382 NW 65 STREET C0071846 MIAMI, FL 33178 MIAMI, FL 33178 2. Principal Place of Business 3. Mailing Address <u>300 ARAGON AVE.</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE SUITE 200 City & State City & State 4. FEI Number Applied For 65-0998764 Not Applicable CORAL GABLES, FL Zip Country Country \$8.75 Additional 5. Certificate of Status Desired X 33134 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ARAZOZA COMAS DE TORRES & Street Address (P.O. Box Number is Not Acceptable) FERNANDEZ-FRAGA 2100 SALZEDO STREET SUITE 300 CORAL GABLES, FL 33134 Zip Code 78. 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY, 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (11/00) DP TITLE ☐ Delete TITLE Change Addition CAMILO SARAVIA NAME NAME STREET ADDRESS QUINTA AVE. 9-36 ZONA 14 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GUATEMALA, GUATEMALA TITLE DVP ☐ Delete TITLE ☐ Change Addition NAME NAME **GUSTAVO SARAVIA** STREET ADDRESS STREET ADDRESS OUINTA AVE. 9-36 ZONA 14 CITY-ST-ZIP CITY-ST-ZIP GUATEMALA, GUATEMALA Addition ☐ Delete TITLE Change | TITLE NAME. NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ■ Addition Delete Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-7iP CITY-ST-ZIP 13. Thereby 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.

GUSTAVO SARAVIA

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Accounting & Tax Service, Inc.

June 8:-2001-

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

Re: Lit Lighting, Inc.

Document no. P00000029108

2001 Annual Report/Uniform Business Report

Dear Sir or Madam:

Enclosed please find:

- 1) Original Uniform Business Report 2001
- 2) A check payable to the Department of State in the amount of \$158.75

We are respectfully requesting abatement of the penalties since the above corporation did not received the form at the time to file the report. This was his first year in business.

Please review the above circumstances and abate the penalty fee as Mr. Saravia acted in good faith to try and comply with the law and he has made a commitment to make the payment of renewal timely in the future:

We thank you in advance for your cooperation in this matter and ask, if you need additional information do not hesitate to call or contact us at your earliest convenience.

Sincerely,

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Gustavo Saravia

President

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