

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000042102

1. Entity Name

BISCAYNE BAY WINGNET SHRIMPERS OF FLORIDA ASSOCI

Principal Place of Business

3315 S.W. 91ST AVENUE
MIAMI FL 33165

Mailing Address

3315 S.W. 91ST AVENUE
MIAMI FL 33165

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOPEZ, REGINA
3315 S.W. 91ST AVENUE
MIAMI FL 33165

Name

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

City

FL

Zip Code

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME LOPEZ, REGINA
STREET ADDRESS 3315 S.W. 91ST AVENUE
CITY-ST-ZIP MIAMI FL 33165

TITLE D ☐ Delete
NAME GOMEZ, EILEEN
STREET ADDRESS 10346 N.W. 29TH CT.
CITY-ST-ZIP MIAMI FL 33147

TITLE D ☒ Delete
NAME PEREZ, ARMANDO
STREET ADDRESS 3633 S.W. 87TH PLACE
CITY-ST-ZIP MIAMI FL 33165

TITLE D ☐ Delete
NAME LOPEZ, JESUS
STREET ADDRESS 3315 SW 91ST AVENUE
CITY-ST-ZIP MIAMI FL 33165

TITLE D ☐ Delete
NAME HERRERA, MANUEL
STREET ADDRESS 2820 S.W. 7TH AVENUE RD.
CITY-ST-ZIP MIAMI FL 33129

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME JORGE LUIS CRUZ
STREET ADDRESS 10350 NW 32 ave
CITY-ST-ZIP MIAMI, FL 33147

TITLE D ☐ Change ☒ Addition
NAME MIGUEL LLANEZ JR
STREET ADDRESS 316 W 45 ST
CITY-ST-ZIP HIALEAH, FL 33012

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

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

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

TITLE ☐ Change ☐ 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

March 23, 2001 (305) 223-4870
Date Daytime Phone #

FILED
Mar 28, 2001 8:00 am
Secretary of State

03-28-2001 90072 036 ***150.00

937515



DO NOT WRITE IN THIS SPACE

4. FE Number

65-1002788

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

CR2E034 (10/00)