

2003

112

UNIFORM BUSINESS REPORT (UBR)DOCUMENT # **P00000050465**

1. Entity Name

COLCHONERIA DON EMILIO, INC.FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 OCT 23 PM 3:53

Principal Place of Business

**821 NW 42ND AVE
MIAMI FL 33126**

Mailing Address

**7344 SW 82ND ST.
SUITE C-116
MIAMI FL 33143**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT
DO NOT WRITE IN THIS SPACE

03

4. FEI Number

65-1010643

Applied For

Not Applicable

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

**SHOMAR, JOSEPH
17439 NW 66 CT.
MIAMI FL 33015**

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State10. 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 **PD** ☐ Delete
NAME **DOKMAJI, RIZKALLAH**
STREET ADDRESS **7330 SW 82 STREET #B-117**
CITY-ST-ZIP **MIAMI FL 33143**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **VSD** ☐ Delete
NAME **DOKMAJI, CHARLI**
STREET ADDRESS **7330 SW 82 STREET #B-117**
CITY-ST-ZIP **MIAMI FL 33143**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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CITY-ST-ZIPTITLE ☐ 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:

*Rizkallah Dokmaji*100024054531
10/23/03 01070 003 **150.00

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Colchoneria Don Emilio, Inc.
821 NW 42nd Ave.
Miami Fl, 33126
(305)642-5875

October 21, 2003

Division of Corporations
Uniform Business Report Filings
P.O. BOX 1500
Tallahassee Fl, 32302-1500

Re: 2003 Uniform Business Report for Colchoneria Don Emilio, Inc.
Reference Number: **P00000050465**

I would like to draw your kind attention to the fact that the 2003 UBR form for Colchoneria Don Emilio, Inc. was not filed on time this year reason being that we never received the UBR form.

Please take this into consideration and accept the original filing fee of \$150.00.

If you need any additional information please contact me at the number above.

Respectfully,

Rizkallah Dokmaji *R.D.*
Colchoneria Don Emilio, Inc.