

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000052100

1. Entity Name

ON-BOARD ENGINEERING TECHNOLOGIES, INC.

Principal Place of Business

Mailing Address

1380 W. FLAGLER ST
MIAMI FL 33135 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
MIAMI FL

City & State

Zip Country

Zip Country

4. FEI Number

65 1012042

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROGER BESU
1225 BRICKELL AVE SUITE 0206
MIAMI FL 33129

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 reappointing)

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 DP
NAME ALVIO DOMINGUEZ
STREET ADDRESS 1380 W FLAGLER ST
CITY- ST- ZIP MIAMI, FL 33135

TITLE DP
NAME MARINO VELAZQUEZ
STREET ADDRESS 1380 W FLAGLER ST
CITY- ST- ZIP MIAMI FL 33135

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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)(c), 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:

MARINO VELAZQUEZ

10/24/01

305 6422638

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Signature Printed

CR2E034 (11/00)