

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000053010

1. Entity Name
A & E GOING GLOBAL, INC.

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90099 015 ***150.00

Principal Place of Business
8214 NW 14TH ST.
MIAMI FL 33126

Mailing Address
8214 NW 14TH ST.
MIAMI FL 33126



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
15327 NW 60 Ave
Suite, Apt. #, etc.
201
City & State
Miami Lakes, FL
Zip
33014
Country
USA

3. Mailing Address
15327 NW 60 Ave
Suite, Apt. #, etc.
201
City & State
Miami Lakes, FL
Zip
33014
Country
USA

4. FEI Number
65-1009697
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
PRIETO, ABEL
8214 NW 14TH ST.
MIAMI FL 33126

7. Name and Address of New Registered Agent
Name - Prieto, Abel
Street Address (P.O. Box Number is Not Acceptable)
15327 NW 60 Ave
Suite 201
City
Miami Lakes FL Zip Code
33014

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 Abel Prieto, Director 3/26/01
(NOTE: Registered Agent signature required when reinstating)

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	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PRIETO, ABEL 8214 NW 14TH ST. MIAMI FL 33126 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PRIETO, EILEEN 8214 NW 14TH ST. MIAMI FL 33126 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Prieto, Abel 15327 NW 60 Ave, #201 Miami Lakes, FL 33014 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Prieto, Eileen 15327 NW 60 Ave, #201 Miami Lakes, FL 33014 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Abel Prieto, Director 3/26/01 698-0111
(NOTE: Registered Agent signature required when reinstating)

CR2E034 (10/00)