

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 21, 2001 8:00 am**  
**Secretary of State**

05-21-2001 90356 005 \*\*\*150.00

769056

DO NOT WRITE IN THIS SPACE

**DOCUMENT #** P00000059140

1. Entity Name

MARTIN, OMIER, AND ASSOCIATES, INC.

Principal Place of Business

14032 West Dixie HWY  
 Miami, FL 33161

Mailing Address

14032 West Dixie HWY  
 Miami, FL 33161

2. Principal Place of Business

1632 NE 148th Street

Suite, Apt. #, etc.

3. Mailing Address

1960 NW 195th Street

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Opa Locka, FL

4. FEI Number

65-1018208

Applied For

Not Applicable

Zip

33181

Country

USA

Zip

33056

Country

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

MILTON G. OMIER  
 14032 West Dixie HWY  
 Miami, FL 33161

7. Name and Address of New Registered Agent

Name  
 MILTON G. OMIER  
 Street Address (P.O. Box Number is Not Acceptable)  
 1960 NW 195th Street

City  
 Opa Locka FL Zip Code  
 33056

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

4/26/01

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  
 D MILTON OMIER ☐ Delete  
 1960 NW 195th Street  
 Opa Locka, FL 33161

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 PRESIDENT  
 MANUEL MARTIN ☐ Change ☒ Addition  
 2801 NE 183rd Street Apt#1705  
 Miami, FL 33160

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

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

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

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MILTON OMIER

04/25/01 (305)948-6145

Date

Daytime Phone #

CR2E034 (11/00)