

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State
 04-30-2001 90049 049 ***150.00

DOCUMENT # **00000060142**

1. Entity Name

The Queen Holdings, Inc.

Principal Place of Business

Mailing Address

**14355 S.W. 110 Terr.
 Miami, FL 33186**

SAME

2. Principal Place of Business

**14355 S.W. 110 Terr.
 Suite, Apt. #, etc.**

3. Mailing Address

**SAME
 Suite, Apt. #, etc.**

City & State

Miami, FL 33186

City & State

Zip

Country

Dade

Zip

Country

4. FEI Number

65-1032585

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required.**

DO NOT WRITE IN THIS SPACE

A0054951

6. Name and Address of Current Registered Agent

**Wilfredo R. Padron
 14355 S.W. 110 Terr.
 Miami, FL 33186**

7. Name and Address of New Registered Agent

Name

- SAME -

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 X

Wilfredo R. Padron (V.P. + Secretary)

4/11/01

Signature, typed or printed name of registered agent and title if applicable

(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	President-Treasurer	☐ Delete
NAME	Rosendo Duran	
STREET ADDRESS	9440 S.W. 20 St.	
CITY-ST-ZIP	Miami, FL 33165	
TITLE	V.P. - Secretary	☐ Delete
NAME	Wilfredo R. Padron	
STREET ADDRESS	14355 S.W. 110 Terr.	
CITY-ST-ZIP	Miami, FL 33186	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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		
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 an officer like empowered.

SIGNATURE: X

Wilfredo R. Padron

4/11/01

(305) 386-2770

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone