

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P00000063610**

1. Entity Name

DOMINICAN FOOD CORPORATION**FILED**
Apr 12, 2001 8:00 am
Secretary of State

03-19-2001 90478 003 ***150.00

Principal Place of Business

**500 NE 172ND ST
N MIAMI BEACH FL 33162**

Mailing Address

**500 NE 172ND ST
N MIAMI BEACH FL 33162**

2. Principal Place of Business

1141 NW 70th Avenue

3. Mailing Address

1141 NW 70th Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Hollywood FL

City & State

Hollywood FL

4. FEI Number

65-1051551

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

**URENA, EDMUNDO R
500 NE 172ND ST
N MIAMI BEACH FL 33162**

7. Name and Address of New Registered Agent

Name **MAGDALENO M. ALVAREZ**Street Address (P.O. Box Number is Not Acceptable)
1141 NW 70th AvenueCity **Hollywood****FL**Zip Code
33024

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

*Magdaleno M. Alvarez***Magdaleno M. Alvarez, President****03/13/2001**

(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, 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	P	☐ Delete
NAME	URENA, EDMUNDO R	
STREET ADDRESS	500 NE 172ND ST	
CITY-ST-ZIP	N MIAMI BEACH FL 33162	

TITLE	V	☐ Delete
NAME	TEJADA, RAMON O	
STREET ADDRESS	500 NE 172ND ST	
CITY-ST-ZIP	N MIAMI BEACH FL 33162	

TITLE	TS	☐ Delete
NAME	ALVAREZ, MIKE	
STREET ADDRESS	1141 N 70TH AVE	
CITY-ST-ZIP	HOLLYWOOD FL 33024	

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	P	☐ Change ☒ Addition
NAME	Magdaleno M. Alvarez	
STREET ADDRESS	1141 NW 70th Avenue	
CITY-ST-ZIP	Hollywood, FL 33024	

TITLE	V	☐ Change ☒ Addition
NAME	Jacqueline Alvarez	
STREET ADDRESS	1141 NW 70th Avenue	
CITY-ST-ZIP	Hollywood, FL 33024	

TITLE	TS	☒ Change ☐ Addition
NAME	Edmundo R. Urena	
STREET ADDRESS	500 NE 172nd Street	
CITY-ST-ZIP	North Miami Beach, FL 33162	

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 all other like empowered.

SIGNATURE: *Magdaleno M. Alvarez***Magdaleno M. Alvarez, President****03/13/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CFR2034 (10/00)