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

## FILED Apr 26, 2001 8:00 am Secretary of State DOCUMENT # P00000064721 BENJAMIN TWINS INVESTMENT GROUP CORP. 04-26-2001 90033 030 \*\*\*158.75 Principal Place of Business Mailing Address 3254 CHARLES AVE 3254 CHARLES AVE MIAMI FL 33133 MIAMI FL 33133 2. Principal Place of Business 3. Mailing Address AVE. 2260 N.W 94 AVE 9360 Suite, Apt. #, etc. Suite, Apt. #. etc DO NOT WRITE IN THIS SPACE City & State City & State FEI Number Applied For MIAN $\mathcal{M}_{\mathcal{M}}$ Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CIANO DIAZ, RICARDO J O. Box Number is Not Acceptable Street Addi 3254 CHARLES AVE **MIAMI FL 33133** 3950 M / B msubmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD TITLE ☐ Delete TITLE Change Addition VILLALBA, FELICIANO NAME STREET ADDRESS 5825 SW 117TH AVE STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33183** CITY-ST-ZIP TITLE Delete TITI F Change □ Addition DIAZ, RICARDO J NAME 11225 N KENDALL DR #104 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33176** CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP TITLE Delete TISLE Change Addition NAME NAME STREET ADDRESS STREET ACCRESS CITY-ST-ZIF CITY-ST-ZIP TITLE Delete TiTLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P 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 of 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.