

2001 UNIFORM BUSINESS REPORT (UBR)

0142 39 SP

DOCUMENT # P00000068371

1. Entity Name

VALENCIA JEWELRY MANUFACTURERS CORP.

Principal Place of Business

9561 HARDEN AVENUE
SURFSIDE FL 33156

Mailing Address

9561 HARDEN AVENUE
SURFSIDE FL 33156

2. Principal Place of Business

9561 Harden Ave.

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami Beach FL

City & State

Miami Beach

Zip

33154

Country

Zip

33154

Country

4. FEI Number

65-1024300

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.

343 ALMERIA AVENUE

CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

JUAN VALENCIA

Street Address (P.O. Box Number is Not Acceptable)

5401 Collins Ave. Apt 819

City

Miami Beach

FL

Zip Code

33140

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

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 PTD ☐ Delete
NAME VALENCIA, SUSY T
STREET ADDRESS 9561 HARDEN AVENUE
CITY-ST-ZIP SURFSIDE FL 33156

TITLE VD ☐ Delete
NAME VALENCIA, JUAN G
STREET ADDRESS 9561 HARDEN AVENUE
CITY-ST-ZIP SURFSIDE FL 33156

TITLE S ☐ Delete
NAME VALENCIA, AZUCENA B
STREET ADDRESS 9561 HARDEN AVENUE
CITY-ST-ZIP SURFSIDE FL 33156

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 300004638663-4
STREET ADDRESS -10/17/01--01002--014
CITY-ST-ZIP ****750.00 ****750.00

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

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

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/6/2001

Date

305 867 6387

Daytime Phone #

PROVED
AND
FILED

01 OCT -3 PM 2:51

SECRETARY OF STATE
TALLAHASSEE

REINSTATEMENT

2001



JP

DO NOT WRITE IN THIS SPACE

CR2E034 (5/01)