

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2003 8:00 am
Secretary of State

01-30-2003 90137 026 ***150.00

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DOCUMENT # P00000073468

1. Entity Name

CARLOS R. BAEZ PHOTOGRAPHY, INC.



Principal Place of Business

8625 SW 43 STREET
MIAMI FL 33155

Mailing Address

8625 SW 43 STREET
MIAMI FL 33155

30015010



2. Principal Place of Business

6000 SW 109 ave.

3. Mailing Address

6000 SW 109 ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

65-1030165

Applied For

Not Applicable

Zip 33173

Country USA

Zip 33173

Country USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BAEZ, CARLOS R
8625 SW 43 STREET
MIAMI FL 33155

7. Name and Address of New Registered Agent

Name Baez, Carlos R.

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

6000 SW 109 ave.

City Miami

FL

Zip Code 33173

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME BAEZ, CARLOS R
STREET ADDRESS 8625 SW 43 STREET
CITY-ST-ZIP MIAMI FL 33155

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/B ☒ Change ☐ Addition
NAME Baez, Carlos R.
STREET ADDRESS 6000 SW 109 ave.
CITY-ST-ZIP Miami, FL 33173

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIG. Carlos R. Baez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/03

Date

305-271-2710

Daytime Phone #

CR2E034 (10/02)