

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 26, 2002 8:00 am
Secretary of State

06-26-2002 90074 025 ***150.00

DOCUMENT # P000 000 82855

1. Entity Name

COLOR'S IMPORT-EXPORT, CORPORATION

DO NOT WRITE IN THIS SPACE

B0125975

2. Principal Place of Business

1444 BISCAYNE BLVD

3. Mailing Address

9601 FONTAINEBLEAU BLVD

Suite, Apt., etc.

208

Suite, Apt., etc.

317

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-1042972

Applied For

Not Applicable

Zip

33132

Country

USA

Zip

33172

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

EDUARDO MEDELLIN

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

9601 FONTAINEBLEAU BLVD

City

MIAMI

FL

Zip Code

33172

**DO NOT WRITE
IN THIS SPACE**

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

Edwards Medellin P.

4-30-02

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

(NOTE: Registered Agent signature required when reinsuring)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 D/P
NAME EDUARDO MEDELLIN 317
STREET ADDRESS 9601 FONTAINEBLEAU BLVD#
CITY-ST-ZIP MIAMI, FL 33172

TITLE D/V
NAME ANTONIO BEDOYA
STREET ADDRESS CALLE 159 3594, APT 404
CITY-ST-ZIP BOGOTA, COLOMBIA

TITLE
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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Edwards Medellin P.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-02

Date

(786) 286-1925

Daytime Phone #

CR2E034B (12/01)