

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

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90241 012 ***150.00

DOCUMENT # P00000091189

1. Entity Name

Now REALTY GROUP, INC.



DO NOT WRITE IN THIS SPACE

11017039

2. Principal Place of Business

5200 SW 8 STREET

3. Mailing Address

5200 SW 8 ST

Suite, Apt. #, etc.

SUITE 111

Suite, Apt. #, etc.

SUITE 111

City & State

CORAL GABLES, FL.

City & State

CORAL GABLES, FL.

4. FEI Number

65-1045622

Applied For

Not Applicable

Zip

33134

Country

USA

Zip

33134

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

ONELIA RUIZ BUENO

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

14011 SW 40 TER

City

MIAMI

FL

Zip Code

33175

**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. 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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
ONELIA RUIZ BUENO
14011 SW 40 TER
MIAMI, FL. 33175

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VICE-PRES
LAURA ZAMORA
11370 SW 30 ST
MIAMI, FL. 33165

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ONELIA RUIZ BUENO

4/21/03

(305) 442-4457

Date

Daytime Phone #

CR2E034B (12/02)