

2001 UNIFORM BUSINESS REPORT (UBR)

1/

FILED
Feb 19, 2001 8:00 am
Secretary of State

01-23-2001 90076 031 ***150.00

DOCUMENT # P00000091773

1. Entity Name
WESTERN BROKERS INC.



Principal Place of Business
3061 S.W. 11 STREET
MIAMI FL 33135

Mailing Address
3061 S.W. 11 STREET
MIAMI FL 33135

01040



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
6955 NW 77 Ave
 Suite, Apt. #, etc.
307

3. Mailing Address
POBox 352588
 Suite, Apt. #, etc.
307

City & State
MIAMI FLA
 Zip
33135

City & State
MIAMI
 Zip
33135

4. FEI Number
650978349

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PINO, JOSE
3061 S.W. 11 STREET
MIAMI FL 33135

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 *Jose Pino*

DATE **1-9-1**

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST PINO, JOSE 3061 S.W. 11 STREET MIAMI FL 33135	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CR2004 (10/00)

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 *Jose Pino*

DATE **1-9-1** DAYTIME PHONE # **305-888-1411**