

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90115 027 ***150.00

DOCUMENT # P00000092415

1. Entity Name

MATRIX REAL ESTATE MANAGEMENT, INC.



Principal Place of Business

7661 NW 68 STREET

SUITE 126

MIAMI FL 33166

US

Mailing Address

7661 NW 68 STREET

SUITE 126

MIAMI FL 33166

US



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

2450 HOLLYWOOD BLVD.

Suite, Apt. #, etc.

SUITE 102

City & State

HOLLYWOOD

Zip

33020

Country

USA

3. Mailing Address

2450 HOLLYWOOD BLVD

Suite, Apt. #, etc.

SUITE 102

City & State

HOLLYWOOD

Zip

33020

Country

USA

4. FEI Number

65-1092489

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WEISS, MICHAEL N ESQ.

1401 BRICKELL AVE., #300

MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

Raul Garmendia

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

2450 Hollywood BLV Suite 102

City

Hollywood FL

State

FL

Zip Code

33020

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

Raul Garmendia

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

(NOTE: Registered Agent signature required when reinstating)

3/12/03

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 **GARMENDIA, RAUL**
STREET ADDRESS **210 SEAVIEW DR., #507**
CITY-ST-ZIP **KEY BISCAYNE FL 33149**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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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:

Raul Garmendia

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/03

Date

Daytime Phone #

2862770214

CR2E034 (10/02)