

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

04-01-2002 90621 005 ***150.00

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DOCUMENT # P00000099242

1. Entity Name

HOLGUIN, INC.

Principal Place of Business

4657 S.W. 71ST AVE.
MIAMI FL 33155

Mailing Address

4657 S.W. 71ST AVE.
MIAMI FL 33155

2. Principal Place of Business

4808 SW 72 AVENUE

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA 33155

Zip 33155

Country USA

3. Mailing Address

4808 SW 72 avenue

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

Zip 33155

Country USA

4. FEI Number

65-1049193

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HOLGUIN, MARIA ELENA
8673 SW 137 AVENUE
MIAMI FL 33183

7. Name and Address of New Registered Agent

Name HOLGUIN, MARIA ELENA

Street Address (P.O. Box Number is Not Acceptable)
12103 SW 105 LANE

City MIAMI

FL

Zip Code 33186

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 Maria Elena Holguin

MARIA ELENA HOLGUIN

3-5-02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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

TITLE PD ☐ Delete
NAME HOLGUIN, MARIA ELENA
STREET ADDRESS 12103 S.W. 105TH LANE
CITY-ST-ZIP MIAMI FL 33186

TITLE VPD ☐ Delete
NAME HOLGUIN, JESUS EDISON
STREET ADDRESS 12103 S.W. 105TH LANE
CITY-ST-ZIP MIAMI FL 33186

TITLE SD ☐ Delete
NAME COSTALES, MARIA
STREET ADDRESS 12103 S.W. 105TH LANE
CITY-ST-ZIP MIAMI FL 33186

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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

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

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:

Maria Elena Holguin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-5-02

Date

(305) 669-4207

Daytime Phone #

CR2E034 (9/01)