

5/21/03 \$150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 28, 2003 8:00 am
Secretary of State

07-28-2003 90135 012 ***150.00

0131436 AT

DOCUMENT # P00000107514

1. Entity Name

HOMESTEAD COMMERCIAL DEVELOPMENT, INC.



Principal Place of Business
9769 S DIXIE HWY SUITE 101
MIAMI FL 33156

Mailing Address
PO BOX 560182
MIAMI FL 33256-0182
US

2. Principal Place of Business

3. Mailing Address

13704 SW 109 CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Miami FL

City & State

City & State

Zip

Country

Zip

Country

33176

Miami, FLADE

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1058084**

Applied For

Not Applicable

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

PEREZ, ABISAE
13704 S.W. 109 CT
MIAMI FL 33176

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. 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

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERNANDEZ, JORGE O 6080 SW 40 ST MIAMI FL 33155	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MENDIZABAL, OCTAVIO 21801 SW 98 PL MIAMI FL 33190	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEREZ, ABISAE PO BOX 560182 MIAMI FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 persons empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

7/28/03 305-2335725

attachment

July 24, 2003

90147289
P00000107514

Uniform Business Report
Division of Corporations
PO BOX 1500
Tallahassee, FL 32302-1500

FEI # 65-1058084 Homestead Commercial Development, Inc.

Please be advised that I never received the original report to file on time as I always do. I have try to reach by phone 850-488-9000 however you can not speak to a person on this phone number.

I respectfully request that the late fee be waived, inasmuch as I did not receive the form.

I also will like to change my mailing address to my physical address as follows:

13704 S.W. 109 Court
Miami, FL 33176

I am enclosing my check for \$150.00 to cover the fee for 2003.

Should you have any questions, please dont hesitate to call me at 305-233-5725.

Thanking you in advance for you consideration and cooperation on this matter.

Sincerely,

ABISAEI PEREZ
President