

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P 00000114195

Entity Name
UNDOSO ENTERPRISES INC.

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90127 033 ***150.00

Principal Place of Business
1850 S.W. 8 Street
MIAMI, FL. 33135

Mailing Address
1850 S.W. 8 Street
MIAMI, FL. 33135

Principal Place of Business
2476 S.W. 8 Street
Suite, Apt. #, etc.

3. Mailing Address
2476 S.W. 8 Street
Suite, Apt. #, etc.

City & State
MIAMI, Florida

City & State
MIAMI, Florida

Zip
33135

Country
DADE

Zip
33135

Country
DADE.

4. FEI Number
65-1094249

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

HERENA SANTOS
13011 S.W. 11 Street
MIAMI, Florida 33184

7. Name and Address of New Registered Agent

Name
ROSAIVYS ALVAREZ

Street Address (P.O. Box Number is Not Acceptable)
13011 S.W. 11 Street

City
MIAMI

FL

Zip Code
33184

3. 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  ROSAIVYS ALVAREZ

4-20-01

Signature typed or printed name of registered agent and title 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, 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.D. HERENA SANTOS 13011 SW 11 Street MIAMI, Florida 33184	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP-S ROSAIVYS ALVAREZ 13011 S.W. 11 Street MIAMI, Florida 33184	<input checked="" 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.D. ROSAIVYS ALVAREZ 13011 S.W. 11 Street MIAMI, Florida 33184	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  ROSAIVYS ALVAREZ

4-20-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)