

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 26, 2003 8:00 am
Secretary of State

03-26-2003 90141 014 ***158.75

DOCUMENT # P01000004931

1. Entity Name

OSORIO BROTHERS CORP.



DO NOT WRITE IN THIS SPACE

90061487

2. Principal Place of Business
7911 NW 64 STREET

Suite, Apt. #, etc.

3. Mailing Address
7911 NW 64 STREET

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
MIAMI, FL

City & State
MIAMI, FL

4. FEI Number 65-1069679

Applied For
Not Applicable

Zip
33166

Country

Zip
33166

Country

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name MCGIVERN, MARTHA

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

10877 SW 132 CIRCLE COURT

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

MCGIVEN, MARTHA

03/19/2003

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
OSORIO, JORGE
10877 SW 132 CIR. CT. MIAMI, FL 33186

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
CITY-ST-ZIP
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OSORIO, BEATRIZ
10877 SW 132 CIR. CT. MIAMI, FL 33186

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CITY-ST-ZIP
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OSORIO, FABIOLA
10877 SW 132 CIR. CT. MIAMI FL 33186

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

JORGE OSORIO

03/19/2003

305 383-3888

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E0348 (12/02)