

2002 UNIFORM BUSINESS REPORT (UBR)

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FILED
Mar 29, 2002 8:00 am
Secretary of State

02-24-2002 90032 011 ***150.00

DOCUMENT # P01000011060

1. Entity Name
AUDIO & VIDEO OF MIAMI, INC.

Principal Place of Business
**7082 NW 50TH ST
MIAMI FL 33166**

Mailing Address
**7082 NW 50TH ST
MIAMI FL 33166**

2. Principal Place of Business
255 E. FLAGLER ST.

3. Mailing Address
255 E. FLAGLER ST.

Suite, Apt. #, etc.
SUITE 211

Suite, Apt. #, etc.
SUITE 211

City & State
MIAMI, FL

City & State
MIAMI, FL

4. FEI Number
65-1073059

Applied For
☐ Not Applicable

Zip
33131

Country
U.S.A.

Zip
33131

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SCHAFIR, HECTOR
7082 NW 50TH ST
MIAMI FL 33166**

7. Name and Address of New Registered Agent

Name
H. JARES GIL SIMON ALFREDO
Street Address (P.O. Box Number is Not Acceptable)
255 E. FLAGLER ST., STE 211
City
MIAMI FL Zip Code
33131

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 **SIMON ALFREDO HJARES GIL PRESIDENT 02-04-02**
Signature, typed or printed name of registered agent and this 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 **D** ☒ Delete
NAME **SCHAFIR, HECTOR**
STREET ADDRESS **7082 NW 50TH ST.**
CITY-ST-ZIP **MIAMI FL 33166**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 **P** ☒ Change ☐ Addition
NAME **HJARES GIL, SIMON ALFREDO**
STREET ADDRESS **255 E. FLAGLER ST., STE 211**
CITY-ST-ZIP **MIAMI, FL 33131**

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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 another like empowered.

SIGNATURE: **SIMON ALFREDO HJARES GIL 02-04-02**
Signature, typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/01)