

2002 UNIFORM BUSINESS REPORT (UBR)

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

04-29-2002 90207 011 ***150.00

DOCUMENT # P01000011529

1. Entity Name

SOCIEDAD RECUERDO, CORPORATION

Principal Place of Business

C/O DAVID J. HART, P.A.
100 N. BISCAYNE BLVD., SUITE 2600
MIAMI FL 33132

Mailing Address

C/O DAVID J. HART, P.A.
100 N. BISCAYNE BLVD., SUITE 2600
MIAMI FL 33132

2. Principal Place of Business

21 SE 1st AVENUE

3. Mailing Address

21 SE 1st AVENUE

Suite, Apt. #, etc.

10th Floor

Suite, Apt. #, etc.

10th Floor

City & State

MIAMI FLORIDA

City & State

MIAMI FLORIDA

Zip

33131

Country

USA

Zip

33131

Country

USA

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HART, DAVID J
100 N. BISCAYNE BLVD.
SUITE #2600
MIAMI FL 33132

7. Name and Address of New Registered Agent

Name **DAVID J. HART PA**

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

21 SE 1st AVENUE

10th Floor

City **MIAMI**

FL

Zip **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

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, 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 **CORDOBA, OSBELIO**
STREET ADDRESS **100 N. BISCAYNE BLVD., SUITE 2600**
CITY-ST-ZIP **MIAMI FL 33132**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
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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 **D** ☒ Change ☐ Addition
NAME **CORDOBA, OSBELIO**
STREET ADDRESS **21 SE 1st AVENUE, 10th Floor**
CITY-ST-ZIP **MIAMI FL 33131**

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

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-15-02 205 577-9977

Date

Daytime Phone #

CR2E034 (9/01)