

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

02 OCT 24 PM 4:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 0010000016678

1. Entity Name

Nok Management and Investments, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10006 SW 26 TERR

Suite, Apt. #, etc.

3. Mailing Address

7531 SW 149th CT

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami

City & State

Miami

FL

Zip

FL 33165

Country

Zip

33193

Country

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Manuel Leon

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

7531 SW 149th CT

City

Miami

FL

Zip Code

33193

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 date if applicable

(NOTE: Registered Agent signature required when reinstating)

10-22-02

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 Manuel Leon
7531 SW 149th CT
Miami, FL 33193

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Rabdom Leon
12867 SW 62 Ln
Miami, FL 33183

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IN THIS SPACE

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 507, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other filers empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-22-02

786-344-5492

Date

Phone Number

CR2E034B (12/01)

**Nole Management and
Investments, Inc.**

7531 SW 149th Court
Miami, FL 33193

October 22, 2002

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

Dear Sir or Madam:

I hereby let you know that due to not receiving the uniform business report forms, we could not send the paperwork and the monies assessed in a timely fashion. For that reason our corporation is now inactive. We apologize for the situation, but notice that it was not the result of recklessness on our side, but simply we never received these forms in the mail. Enclosed are the Uniform Business Report and a check for \$150.00. We thank you for your attention to this matter.

Should you have any questions, please feel free to contact us at 786-344-5492.

Sincerely,

Manuel Leon
President of Nole Management and Investments, Inc.