

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 23, 2002 8:00 am
Secretary of State

05-28-2002 91629 050 ***150.00

DOCUMENT # P01000020525

1. Entity Name

MUEBLES RUSTICOS Y ARTESANIAS MECICANAS SABINA I
 NC.

Principal Place of Business

Mailing Address

~~60 WEST 11 ST. #7~~
~~MIAMI FL 33166~~

~~60 WEST 11 ST. #7~~
~~MIAMI FL 33166~~

2. Principal Place of Business

8355 N.W. 66th STREET
 Suite, Apt. #, etc.

3. Mailing Address

8355 N.W. 66th STREET
 Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

4. FEI Number

65-1081139

Applied For

Not Applicable

Zip

33166

Country

MIAMI DADE

Zip

33166

Country

MIAMI DADE

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

8355 N.W. 66th STREET

City MIAMI

FL

Zip Code 33166

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

NAME

STREET ADDRESS

CITY-ST-ZIP

PD
 RIOS, HECTOR A
~~60 W 11ST ST #7~~
~~MIAMI FL 33166~~

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VD
 AGUILA, LEXEIK A J
~~60 W 11ST ST #7~~
~~MIAMI FL 33166~~

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SD
 AGUILA, JUANA R
~~60 W 11ST ST #7~~
~~MIAMI FL 33166~~

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

8355 N.W. 66th STREET
 MIAMI, FLORIDA 33166

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

AGUILA, LEXEIK A J
 8355 N.W. 66th STREET
 MIAMI, FLORIDA 33166

☒ Change ☐ Addition

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☐ Change ☐ 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: x

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HECTOR A. RIOS

Date

Daytime Phone #

CR2E034 (9/01)