

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2002 8:00 am
Secretary of State

05-09-2002 90050 030 ***150.00

DOCUMENT # P01000020565

1. Entity Name

QUIRIQUIRI, INC.

Principal Place of Business

782 NW 42 AVE STE 637
 MIAMI FL 33126

Mailing Address

782 NW 42 AVE STE 637
 MIAMI FL 33126

2. Principal Place of Business

1532 TAMARIND CT.
 Suite, Apt. #, etc.

3. Mailing Address

1532 TAMARIND CT.
 Suite, Apt. #, etc.

City & State

WESTON FL

City & State

WESTON

4. FEI Number

65-1081047

Applied For

Not Applicable

Zip

33327

Country

USA

Zip

33327

Country

USA

5. Certificate of Status Desired - ☐ ☐ ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MAZZA-MARTINEZ, TANIA A
 782 NW 42 AVE STE 637
 MIAMI FL 33126

7. Name and Address of New Registered Agent

Name

MAZZA-MARTINEZ, PA

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

780 NW 42 AV. Suite 420

City

MIAMI

FL

Zip Code

33126

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

4/16/02

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirements 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 DP
 NAME BAPTISTA, LEOPOLDO R
 STREET ADDRESS 782 NW 42 AVE STE 637
 CITY-ST-ZIP MIAMI FL 33126 ☐ Delete

TITLE D
 NAME BAPTISTA, JOSE F
 STREET ADDRESS 782 NW 42 AVE STE 637
 CITY-ST-ZIP MIAMI FL 33126 ☐ Delete

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

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

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

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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 all other like empowered.

SIGNATURE: YOSOL BAPTISTA
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/02 305-5194765
 Date Daytime Phone #

CR2E034 (9/01)