

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 13, 2002 8:00 am
Secretary of State

06-13-2002 90385 033 ***150.00

DOCUMENT # P01000034754

1. Entity Name
ZIP CELL INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 8160 Geneva Court Suite, Apt. #, etc. Building 216-A City & State MIAMI FL 33166 Zip 33166 Country	3. Mailing Address 8160 Geneva Court Suite, Apt. #, etc. BLDG 216-A City & State MAIMI FL 33166 Zip 33166 Country
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DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1094614	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
ADOLFO E. IGLESIAS

Street Address (P.O. Box Number is Not Acceptable)
13501 SW 128th Street

Suite 208

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) ☐

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 JERONIMO X DE MIRANDA 8160 GENEVA COURT # 216-A Miami FL 33166	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

06/07/2002 7864862011

Attachment
P01000034754
118067
ZIP CELL INC.
8160 GENEVA COURT, BUILDING 216-A
MIAMI, FLORIDA 33166

June 8, 2002

Division of Corporations
Uniform Business Report Filings
P. O. Box 1500
TALLAHASSEE, FL 32302-1500

To Whom It May Concern:

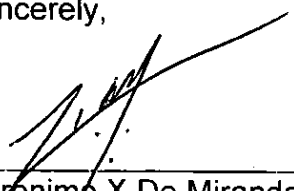
We are submitting the "For Profit Corporation Uniform Business Report" along with the fee of \$150.00.

We request that the penalty fee be waived.

We tried to get the form when we realized that it did not get forwarded to our new address. We finally got the form to file. We have made a good faith effort to comply as soon as we could. Our previous Registered agent did not prepare our form or notify us of its arrival at his office. Our new registered agent informed us that we needed to file and we did so as soon as we could.

Thank you

Sincerely,


Jeronimo X De Miranda
Zip Cell Inc..