

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

DOCUMENT # P01000035889

1. Entity Name

OAMC GROUP INC.



FILED

03 APR 18 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
6104 NW 114 PL

3. Mailing Address
6104 NW 114 PL

Suite, Apt. #, etc.
201

Suite, Apt. #, etc.
201

City & State
MIAMI, FL

City & State
MIAMI, FL

Zip
33178

Country
US

Zip
33178

Country
US

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name OCTAVIO A. MOLINA

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

6104 NW 114 PL # 201

City MIAMI

FL

Zip Code
33178

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Octavio A. Molina

4/17/03

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME (P) OCTAVIO A. MOLINA
STREET ADDRESS 6104 NW 114 PL #201
CITY-ST-ZIP MIAMI, FL 33178

TITLE
NAME
STREET ADDRESS 700017843657
CITY-ST-ZIP 05/01/03--01076--022 **750.00

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IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Octavio A. Molina

4/17/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034B (12/02)

OAMC GROUP INC.

DOC. # PO1000035889

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR THE 2002 UNIFORM BUSINESS REPORT (FIRST NOR SECOND NOTICE OF THE UBR). I HAVE CHANGED MY PRINCIPAL OR MAILING ADDRESS SINCE I INCORPORATED.

I MADE A CHANGE IN BANKING ACCOUNTS WHEN I FOUND OUT THAT I WAS NOT ACTIVE WITH YOUR OFFICE. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT MY CORPORATION IN ITS ACTIVE STATUS AND TO WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER.

CORDIALLY,

Octavio A. Molina
OCTAVIO A. MOLINA
PRESIDENT