

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000036115

1. Entity Name

GAINZA GRAPHIC DESIGN, INC.

Principal Place of Business

16850 NE 3RD COURT  
NORTH MIAMI FL 33162

Mailing Address

16850 NE 3RD COURT  
NORTH MIAMI FL 33162

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

4. FEI Number

65-1094099

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

GAINZA, MIGUEL ANGEL

16850 NE 3RD COURT

NORTH MIAMI FL 33162

Name

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

City

FL

Zip Code

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

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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 GAINZA, MIGUEL ANGEL 16850 NE 3RD COURT NORTH MIAMI FL 33162	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GAINZA, MORAIMA 16850 NE 3RD COURT NORTH MIAMI FL 33162	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 titles empowered.

SIGNATURE:

SIC  D  REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07-08-02 (307)582 6639

Daytime Phone #

FILED  
Jul 17, 2002 8:00 am  
Secretary of State

07-17-2002 90113 024 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (4/02)



Attachment P01000036115  
120777

16850 NE 3Rd. Court, North Miami Beach, Florida 33162 USA 305-249.6531

July 08 2002

**DIVISION OF CORPORATIONS  
UNIFORM BUSINESS REPORT FILINGS  
P.O.Box 1500  
TALLAHASSEE, FLORIDA 32302-1500**

Who may concert:

I received on July 03, the "Uniform Business Report 2002", with a fee of \$550,00 and we called you to the phone number 850-488.9000 listed in the instruccion assistance report, and explained that **GAINZA GRAPHIC DESIGN, INC** never got any other document from you by mail (until now), and this is the first year that my company does this report.

Your representative told me that in this case, we can send you with this letter a fee of \$150,00.

Thanks for your help and consideration in this case.

Gainza, Miguel Angel  
FD.