

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90008 008 ***158.75

DOCUMENT # P01000041146

1. Entity Name
EUROTEC, INC.

Principal Place of Business

**6978 NW 42 ST
 MIAMI FL 33166**

Mailing Address

**6978 NW 42 ST
 MIAMI FL 33166**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1102117

Applied For

Not Applicable

5. Certificate of Status Desired

☒ XX

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**VAZQUEZ, JOSE
 1328 BARRITZ DR
 MIAMI BEACH FL 33186**

7. Name and Address of New Registered Agent

Name **FRANCISCO CASTRO**
 Street Address (P.O. Box Number is Not Acceptable)
10946 S.W. 134th Ave

City **MIAMI** **FL** Zip Code **33186**

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]*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/19/2002

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 | D | <input checked="" type="checkbox"/> Delete |
| NAME | VAZQUEZ, JOSE | |
| STREET ADDRESS | 1328 BARRITZ DR | |
| CITY-ST-ZIP | MIAMI BEACH FL 33186 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | PRESIDENT DIRECTOR | |
| STREET ADDRESS | CASTRO, FRANCISCO | |
| CITY-ST-ZIP | 10946 SW 134 AVE | |
| | MIAMI FL 33186 | |
| TITLE | S.T.D | <input type="checkbox"/> Delete |
| NAME | RODOLFO RODRIGUEZ | |
| STREET ADDRESS | 1000 N.E. 191st St | |
| CITY-ST-ZIP | Miami Fla. 33179 | |
| TITLE | Ass. Sec | <input type="checkbox"/> Delete |
| NAME | IVETTE RODRIGUEZ | |
| STREET ADDRESS | 1000 N.E. 191st St | |
| CITY-ST-ZIP | MIAMI FLA. 33179 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|--|---|
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> 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: *[Signature]* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/19/2002

CR2E034 (9/01)