

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 21, 2003 8:00 am
Secretary of State

07-21-2003 90356 019 ***150.00

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DOCUMENT # P01000051049

1. Entity Name

DANERI CONSULTING, INC.



Principal Place of Business
5300 NW 33 AVE STE 117
FORT LAUDERDALE FL 33309

Mailing Address
5300 NW 33 AVE STE 117
FORT LAUDERDALE FL 33309



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1106105**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SERCHAY, ALLAN

5300 NW 33 AVE STE 117

FORT LAUDERDALE FL 33309

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

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

D
ALEJALDRE, GINES
5300 NW 33 AVE STE 117
FORT LAUDERDALE FL 33309

TITLE
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STREET ADDRESS
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
Gines Alejaldre
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/14/03
Date

954 926 6943
Daytime Phone #

CR2E034 (4/03)

Attachment

90145282
PO1000051049

July 14, 2003

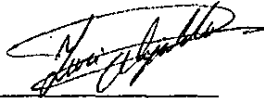
FLORIDA DEPARTMENT OF STATE
DIVISIONS OF CORPORATIONS
P.O. Box 1500
Tallahassee, Fl 32302-1500

To whom it may concern:

This letter is to kindly request that you accept the payment to renew Daneri Consulting, Inc. as a corporation. I never received the original The Uniform Business Report (UBR) form because I moved to another location.

Please accept the payment and the form attached to this letter.

Sincerely yours,



Gines Y. Alejandre
Director