

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 22, 2002 8:00 am
Secretary of State

09-22-2002 90069 029 ***550.00

DOCUMENT # P01000053287

1. Entity Name
SOBRANCE CORP.

Principal Place of Business

**431 W CAMINO REAL #21
BOCA RATON FL 33432**

Mailing Address

**431 W CAMINO REAL #21
BOCA RATON FL 33432**



2. Principal Place of Business

5573 PACIFIC BLVD

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

3513

City & State

BOCA RATON FL

4. FEI Number

65-1116892

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

Zip

33433

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ANDREJCO, JURAJ
431 W CAMINO REAL, #21
BOCA RATON FL 33432**

7. Name and Address of New Registered Agent

Name **ANDREJCO, JURAJ**

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

5573 PACIFIC BLVD # 3513

City

BOCA RATON

FL

Zip Code

33433

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]

09-13-02

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 **ANDREJCO, JURAJ, PRESIDENT**
NAME
STREET ADDRESS **5573 PACIFIC BLVD #3513**
CITY-ST-ZIP **BOCA RATON FL 33433**

☐ Delete

TITLE
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CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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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] **ANDREJCO**

09-13-02

CR2E034 (4/02)