

2002 UNIFORM BUSINESS REPORT (UBR)

0208157 AV

DOCUMENT # P01000053924

1. Entity Name
EMPANADA'S HOUSE, INC.

FILED

02 FEB 22 PM 3:07

Principal Place of Business

2588 SW 27TH AVE
MIAMI FL 33133

Mailing Address

2588 SW 27TH AVE
MIAMI FL 33133



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

229 W 28th St.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Hialeah, FL

City & State

Zip

Country

33010

4. FEI Number

65-1109025

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SANCHEZ, MARISA
2588 SW 27TH AVE
MIAMI FL 33133

7. Name and Address of New Registered Agent

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.

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 \$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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition
NAME PD
STREET ADDRESS MARTINEZ, MARIA E.
CITY-ST-ZIP 300 Bayview DA. #1206
Sunny Isles Beach, FL 33160

TITLE ☐ Change ☒ Addition
NAME VPD
STREET ADDRESS Bubbola, Jimmy
CITY-ST-ZIP 300 Bayview DA. #1206
Sunny Isles Beach, FL 33160

TITLE ☐ Change ☒ Addition
NAME SD
STREET ADDRESS SANCHEZ, MARISA
CITY-ST-ZIP 9425 Fontainebleau Blvd. #204
Miami, FL 33172

TITLE ☐ Change ☐ Addition
NAME 700005074147--2
STREET ADDRESS -03/08/02--01085--016
CITY-ST-ZIP ****150.00 ****150.00

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

MARISA SANCHEZ

2/21/2002 305-444-2213

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)