

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 28, 2003 8:00 am**  
**Secretary of State**  
07-28-2003 90137 040 \*\*\*150.00

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AV

**DOCUMENT # P01000057495**

1. Entity Name  
**TENARES CORP.**

ⓐ ✓



Principal Place of Business  
**3430 N.W. 2ND AVENUE  
MIAMI FL 33127**

Mailing Address  
**3430 N.W. 2ND AVENUE  
MIAMI FL 33127**



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 **65-1114068**

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

**JAVIER, RAMON A  
3430 N.W. 2ND AVENUE  
MIAMI FL 33127**

Name **VALERIO, OSCAR**

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

**3430 NW 2ND AVE**

City **MIAMI** FL **33127**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**7-22-03**

**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	PD JAVIER, RAMON A 3430 N.W. 2ND AVENUE MIAMI FL 33127	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD VALERIO, JUAN R 3430 N.W. 2ND AVENUE MIAMI FL 33127	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VALERIO, OSCAR 3430 NW 2ND AVE MIAMI FL 33127	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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]* **SIGNATURE REQUIRED**

**07-22-03**

**(305) 576-3894**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Attachment #

3430 NW 2<sup>nd</sup> Avenue  
Miami, FL 33127  
Phone (305) 576-3894

90147361

PO1000057495

TENARES Corp.

July 22, 2003

Florida Department of State  
Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302

Dear Sir or Madam:

Reference: Tenares Corp.  
3430 NW 2<sup>nd</sup> Avenue  
Miami, FL 33127  
Federal ID No: 65-1114068

In acknowledging receipt of your remainder renewal for the UBR report for 2003, we find out that we have already mailed the form along with the payment on April 16<sup>th</sup>, 2003. However the check has not been cashed and it is still outstanding. We are sending this "corrected" form with a replacement check for the previously issued one.

We also filed an amendment to the articles of this corporation with the corresponding fee to change the officers and directors of the corporation. However, this UBR form does not reflect the new officers and directors as amended previously.

Please update our records accordingly.

Thanks,

Oscar Valerio  
Tenares Corporation  
President