

# FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # *P01000071164*

1. Entity Name  
*El Muelle Inc*



FILED

04 MAY -5 PM 8:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
*709 N State Rd 7*

3. Mailing Address  
*709 N State Rd 7*

*12-30-03 01031 002 \$150.00*

*03-24-04 01032 009 \$150.00*

City & State  
*Hollywood, FL*

City & State  
*Hollywood, FL*

4. FEI Number  
*65-115587*

Applied For  
☐ Not Applicable

Zip  
*33021*

Country  
*Broward*

Zip  
*33021*

Country  
*Broward*

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
*Victor A. ABENSU*

Street Address (P.O. Box Number Not Applicable)  
*700025843017*

*05/12/04 01048 012 \*\*150.00*

City  
*Pembroke Pines*

FL

Zip Code  
*33024*

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.

*700025843017*  
*12/30/03--01031--002 \*\*150.00*

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
*D/P 1917*  
*Victor Abensu*  
*7770 N.W. 15th Court*  
*Pembroke Pines, FL 33024*

*700025843017*  
*05/24/04 01032 003 \*\*150.00*

TITLE  
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CITY - ST - ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Victor A. ABENSU*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Pres*

*954-8947999*  
Date Daytime Phone

CR2E034B (12/02)

**RJR ACCOUNTING SERVICES**  
**ACCOUNTING/INCOME TAX**

**Rafael J. Rodriguez**  
*Accountant & Financial  
Consultant*

**COPY**

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Divisions Of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500

Reference  
El Muelle Inc D#PO1000071164  
709 N state rd 7  
Hollywood, FL 33021

UBR 2003

Enclosed is a Ck from Wachovia Bank for the amount of \$150.00

We are paying late the UBR 2003, due to the fact that the  
forms were never received by the Officers. Please accept our  
payment in order to keep the Corp active and in good standing

**This is a very small entity with limit cash & assets. We will look forward**  
the UBR form next year in order to paid on Time

All others Florida taxes as Sales tax, Alcohol and Income taxes had being  
filed on time  
Thanks

Very truly yours

Rafael J Rodriguez  
Retired Certified Internal Auditor

December 20 / 03 *g*

CC, Victor Abensur, President

**RJR ACCOUNTING SERVICES**  
**ACCOUNTING/INCOME TAX**

**Rafael J. Rodriguez**  
Accountant & Financial  
Consultant

4/25/04

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To: Fla Dept of State      Re: El Muelle Inc  
Att: B. Mitchell

Enclose are the documents that we  
received with your letter dated 4/15/04.  
With these documents are the letters  
that you previously requested from us.

Also attach is the check for \$150.-

Please expedite this matter

Thanks

Rafael Rodriguez  
Accountant