2002 Uniform Business Report (UBR)

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Mar 26, 2002 8:00 am Secretary of State P01000074859 DOCUMENT # 1. Entity Name GENEVA ROTH HOLDINGS CORP. 03-26-2002 90055 027 ***150.00 Principal Place of Business Mailing Address 10240 SW 5 STREET 10240 SW 5 STREET MIAMI FL 33174 MIAMI FL 33174 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 114541 DE LA TORRIENTE, COSME J ESQ. Street Address (P.O. Box Number is Not Acceptable) 155 SOUTHWEST 25TH ROAD MIAMI FL 33129 ٠, City MIAMI 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Addition TITLE PSTD TITLE ☐ Change ☐ Delete NAME HUGUET, JORGE L NAME STREET ADDRESS 10240 S.W. 5 ST. STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33174** CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE VD NAME HUGUET, JAIRELYN V NAME STREET ADDRESS 10240 S.W. 5 ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33174 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 received or Irustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

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