

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90036 044 ***150.00

DOCUMENT # P01000076687

1. Entity Name

MGV AND ASSOCIATES, INC.



Principal Place of Business

191 N.W. 45 Street Suite 4
 Miami, Florida 33137

Mailing Address

2. Principal Place of Business

801 - 71st Street

Suite, Apt. #, etc.

3. Mailing Address

801 - 71st Street

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami, Florida

Zip
33138

Country
USA

City & State

Miami, Florida

Zip
33138

Country
USA

4. FEI Number

65-1128968

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

Fernandez, Milagros
27553 S Dixie Highway
Homestead, FL 33032

7. Name and Address of New Registered Agent

Name

Garcia-Vidal, Miguel

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

801 - 71st Street

City

Miami

FL

Zip Code
33138

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

Miguel Garcia-Vidal

2/1/2002

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!!! FEES \$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
D
 NAME
Vidal, Miguel G.
 STREET ADDRESS
191 N.W. 45 Street Suite 4
 CITY-ST-ZIP
Miami, FL 33137

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
P, S, D
 NAME
Garcia-Vidal, Miguel
 STREET ADDRESS
801 - 71st Street
 CITY-ST-ZIP
Miami, Florida 33138

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

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 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

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:

Miguel Garcia-Vidal, President

2/1/2002

305 762 6269

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #