

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *P01000078220*

1. Entity Name

*SILVERIO GENERAL MECHANICA, INC.*

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

*2860 NW 17 AVE*

3. Mailing Address

Suite, Apt. #, etc.

*MIAMI*

Suite, Apt. #, etc.

City & State

*FL*

City & State

Zip

*33142*

Country

*DADE*

Zip

Country

4. FEI Number

*65-1127997*

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

*SILVERIO ARIAS*

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

*2860 NW 17 AVE*

City

*MIAMI FL*

*33142*

**FL**

Zip Code

**DO NOT WRITE  
IN THIS SPACE**

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 resigning)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**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	<i>P.</i>
NAME	<i>SILVERIO ARIAS</i>
STREET ADDRESS	<i>2860 NW 17 AVE</i>
CITY-ST-ZIP	<i>MIAMI FL 33142</i>
TITLE	<i>V.P.</i>
NAME	<i>LUCIA ARIAS</i>
STREET ADDRESS	<i>2860 NW 17 AVE</i>
CITY-ST-ZIP	<i>MIAMI FL 33142</i>
TITLE	
NAME	
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**500008579745**  
**10/24/02--01103--017 \*\*150.00**

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IN THIS SPACE**

*10/25*

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

SIGNATURE: *Lucia Arias*

SIGNATURE AND TYPED OR PRINTED NAME

FILED

02 OCT 24 PM 3:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

October 18, 2002

Florida Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

RE: SILVERIO GENERAL MECHANIC, INC.  
REF. NUMBER P01000078220  
2860 NW 17 AVE.  
MIAMI, FL 33142

LETTER NO. 902A00052259

Gentlemen:

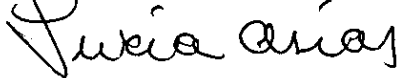
This letter is to inform you that due to problem with my licenses and due to I was not sure if the bussiness was going to open, I delay this process of returning your application with the fees.

I apologize for the incovinience that this may cause to you, but I am including now my application completed and signed with my check for \$150.00.

Thanks in advance for your immediate attention to this matter.

Sincerely yours,

GENERAL MECHANIC, INC.



Silverio Arias  
President

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