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Aug 27, 2003 8:00 am
Secretary of State

08-14-2003 90067 022 ***558.75

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000080885

1. Entity Name
OLD PARR CORP.



Principal Place of Business
3900 NW 79 AVENUE SUITE 444
MIAMI FL 33166

Mailing Address
3900 NW 79 AVENUE SUITE 444
MIAMI FL 33166

55055100

2. Principal Place of Business
8016 N.W. 103 Street
Suite, Apt. #, etc.

3. Mailing Address
c/o Morton R. Goudiss, Receiver
Suite, Apt. #, etc.
P.O. Box 546514

☒ CHECK HERE IF MAKING CHANGES

City & State
Hialeah Gardens, FL
Zip Country
33016 USA

City & State
Surfside, FL
Zip Country
33154-6514 USA

4. FEI Number 65-1140916

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

RODRIGUEZ, CARLOS
3900 NW 79 AVENUE SUITE 444
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name
Morton R. Goudiss, Receiver
Street Address (P.O. Box Number is Not Acceptable)
1090 Kane Concourse Suite 202
City Bay Harbor Islands FL Zip Code 33154

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

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

Receiver and Registered Agent

DATE

Aug 12 2003

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

TITLE D ☒ Delete
NAME RODRIGUEZ, CARLOS
STREET ADDRESS 3900 NW 79 AVENUE SUITE 444
CITY-ST-ZIP MIAMI FL 33166

TITLE D ☒ Delete
NAME GUZMAN, ANTONIO
STREET ADDRESS 3900 NW 79 AVENUE SUITE 444
CITY-ST-ZIP MIAMI FL 33166

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Carlos Rodriguez ☐ Change ☒ Addition
NAME c/o Morton R. Goudiss, Receiver
STREET ADDRESS P.O. Box 546514
CITY-ST-ZIP Surfside, FL 33154-6514

TITLE Antonio Guzman ☐ Change ☒ Addition
NAME c/o Morton R. Goudiss, Receiver
STREET ADDRESS P.O. Box 546514
CITY-ST-ZIP Surfside, FL 33154-6514

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Morton R. Goudiss
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug 12 2003 305-865-6736
Daytime Phone #

CR2E034 (10/02)