

FOR PROPR CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000095192

1. Entity Name

EL TIO IRON WORK, INC.

FILED

03 MAR -6 AM 9:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
JUV28931

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2440 WEST 3rd AVE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HIACLEAH, FLORIDA

City & State

Zip

33010

Country

USA

Zip

Country

4. FEI Number

65-1143016

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Orlando J. Venegas

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

110 East 19 street

City

Hiacleah

FL

Zip Code

33010

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

ORLANDO J. VENEGAS

(NOTE: Registered Agent signature required when reinstating)

DATE

02/12/2003

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to file for the same.

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

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
PVS
VENEGAS, ORLANDO J.
STREET ADDRESS
110 EAST 19 STREET
CITY-STATE-ZIP
HIACLEAH, FL 33010

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ORLANDO J. VENEGAS

Date

Daytime Phone #

02/12/2003 (305) 887-5885