

2002 UNIFORM BUSINESS REPORT (UBR)

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ATX1

DOCUMENT # P01000105826

FILED

02 OCT 24 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name
LORES CLEANERS INC

Principal Place of Business
10000 SW 56 STREET STE 19
MIAMI, FL 33165

Mailing Address
10000 SW 56 STREET STE 19
MIAMI, FL 33165

2. Principal Place of Business
10000 SW 56 STREET

3. Mailing Address
10000 SW 56 STREET

Suite, Apt. #, etc.
SUITE 19

Suite, Apt. #, etc.
SUITE 19

City & State
MIAMI, FL

City & State
MIAMI, FL

Zip Country
33165 DADE

Zip Country
33165 DADE

4. FEI Number ☒ Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
CORPORATE CREATIONS NETWORK INC
941 FOURTH STREET # 200
MIAMI BEACH, FL 33139

7. Name and Address of New Registered Agent
Name
NORMA MELENDEZ
Street Address (P.O. Box Number is Not Acceptable)
14529 SW 95 LANE
City
MIAMI FL Zip Code
33186

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 *Norma Meledez* 10/23/2002
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 Intan-
gible Tax filing requirement and elects to do so. ☐ FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
(See criteria on back) ☐ Make Check Payable to Department of State

10. Election Campaign Financing ☐ \$5.00
Trust Fund Contribution. May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MELENDEZ, NORMA A D 13780 SW 84TH STREET MIAMI, FL 33183 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MELENDEZ, NORMA A P. 14529 SW 95 LANE MIAMI, FL 33186 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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100008808971
11/05/02--01062--024 **300.00

CR2E034 (9/99)

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: *Norma Meledez* PRESIDENT 10/23/2002 305-383-6421

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TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314


TO WHOM IT MAY CONCERN:

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR THE 2002
UNIFORM BUSINESS REPORT (FIRST NOR SECOND NOTICE OF THE UBR). I
HAVE CHANGED MY PRINCIPAL OR MAILING ADDRESS SINCE I
INCORPORATED.

PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT MY CORPORATION IN ITS
ACTIVE STATUS AND TO WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER.

CORDIALLY


Norma A. Melendez
PRESIDENT