

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 04, 2002 8:00 am
Secretary of State

09-04-2002 90093 010 ***150.00

DOCUMENT # P01000107319

1. Entity Name
NINMAR ENTERPRISES INC.

Principal Place of Business
6321 PASADENA POINT BOULEVARD
GULFPORT F: 33707

Mailing Address
6321 PASADENA POINT BOULEVARD
GULFPORT F: 33707

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3755849

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145

Name

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

City

FL

Zip Code

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

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!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **NARANJO, MARIO J**
STREET ADDRESS **6321 PASADENA POINT BOULEVARD**
CITY-ST-ZIP **GULFPORT F: 33707**

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

TITLE **STD** ☐ Delete
NAME **NARANJO, NINA L**
STREET ADDRESS **6321 PASADENA POINT BOULEVARD**
CITY-ST-ZIP **GULFPORT F: 33707**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/27/02
 Date

727-417-4752
 Daytime Phone #

CR2E034 (4/02)

Attachment

978190

PO1000107319

August 27, 2002

Florida Department of State
Division of Corporations

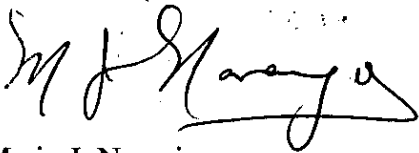
Dear Sir/Ma'am:

In speaking with a gentleman named Matt, in the Division of Corporations, I realized that the enclosed form and fee should have been filed before May 1, 2002. Since I did not receive a form requesting the filing fee the gentleman I was speaking with, Matt, suggested I write you and explain that the reason I did not on time was that I did not receive a filing form earlier in the year. He also indicated that I should submit the original filing fee of \$150 along with the form.

Please find attached the Uniform Business Report and a check for \$150.

If you have any questions, please feel free to contact me.

Thank you



Mario J. Naranjo