

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2003 8:00 am
Secretary of State

01-16-2003 90096 039 ***150.00

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1. Entity Name

HMA MANAGEMENT/CERO'S FENCE, CORP.



Principal Place of Business

7981 SW 176TH ST.
MIAMI FL 33157

Mailing Address

7981 SW 176TH ST.
MIAMI FL 33157

2. Principal Place of Business

1080 E 28th ST

3. Mailing Address

1080 E 28th ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hialeah FL

City & State

Hialeah FL

4. FEI Number

75-2979994

Applied For

Not Applicable

Zip

33013

Country

Zip

33013

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PERSAUD, SAMUEL A ESQ.

1320 S. DIXIE HWY., SUITE 715
CORAL GABLES FL 33146

7. Name and Address of New Registered Agent

Name

GUSTAVO V. LOPEZ

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

7921 SW 40th ST.

SUITE 50

City

MIAMI

FL

Zip Code

33155

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)

GUSTAVO V. LOPEZ

1/13/03

DATE

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 NAME	PD RODRIGUEZ, HUMBERTO	☐ Delete
STREET ADDRESS	7981 SW 176TH ST.	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE NAME	VD RODRIGUEZ, ANTHONY	☐ Delete
STREET ADDRESS	7981 SW 176TH ST.	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE NAME	STD RODRIGUEZ, MARIA ELENA	☐ Delete
STREET ADDRESS	7981 SW 176TH ST.	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARIA ELENA RODRIGUEZ 1/13/03 205-857-8668

Date

Daytime Phone #

CR2E034 (10/02)