

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90164 036 ***150.00

DOCUMENT # P02000013269

1. Entity Name
CHEVEZ INTERNATIONAL, INC.



Principal Place of Business
10411 SW 68TH ST
MIAMI FL 33173

Mailing Address
10411 SW 68TH ST
MIAMI FL 33173

2. Principal Place of Business
7046 SW 103th PLACE

3. Mailing Address
7046 SW 103th PLACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
MIAMI, FL

City & State
MIAMI, FL

4. FEI Number
03-0392429

Applied For
Not Applicable

Zip
33173

Country
USA

Zip
33173

Country
USA

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

6. Name and Address of Current Registered Agent

GONZALEZ-MIXCO, JOSE F
10411 SW 68TH ST
MIAMI FL 33173

7. Name and Address of New Registered Agent

Name
GONZALEZ-MIXCO, JOSE F.
Street Address (P.O. Box Number is Not Acceptable)
7046 SW 103th PLACE
City MIAMI FL Zip Code 33173

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 _____

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	<input type="checkbox"/> Delete
NAME	CHEVEZ, ASTRID C	
STREET ADDRESS	10411 SW 68TH ST	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE	D	<input type="checkbox"/> Delete
NAME	GONZALEZ-MIXCO, JOSE F	
STREET ADDRESS	10411 SW 68TH ST	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE	D	<input type="checkbox"/> Delete
NAME	CHEVEZ-QUINTANILLA, JOSE A	
STREET ADDRESS	10411 SW 68TH ST	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHEVEZ, ASTRID C	
STREET ADDRESS	7046 SW 103 th PLACE	
CITY-ST-ZIP	MIAMI, FL 33173	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GONZALEZ-MIXCO, JOSE F.	
STREET ADDRESS	7046 SW 103 th PLACE	
CITY-ST-ZIP	MIAMI, FL 33173	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHEVEZ-QUINTANILLA, JOSE A.	
STREET ADDRESS	7046 SW 103 th PLACE	
CITY-ST-ZIP	MIAMI, FL 33173	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: ASTRID C. CHEVEZ-QUINTANILLA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-2003

(305) 275-6130

Date

Daytime Phone #

CR2E034 (10/02)