

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

DOCUMENT # P0200006241

1. Entity Name

Alvertex Investments, Inc

03 APR 18 AM 7:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7825 FAIRVIEW Dr.

Suite, Apt. #, etc.

Bldg 25 Ste 101

City & State

Tamara Florida

Zip

33321

Country

U.S. A.

3. Mailing Address

7825 FAIRVIEW Dr.

Suite, Apt. #, etc.

Bldg 25 Ste 101

City & State

Tamara Florida

Zip

33321

Country

U.S. A.

4. FEI Number

01-0703348

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

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IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Antonio Pesquero Jr.

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

7158 NW 44 St

City

Sunrise

FL

Zip Code

33351

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 typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Antonio Pesquero Jr.

4/10/03

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back)

☐

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  
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

President

Harold Alvarez

612 W. PATTERSON Av #309

Chicago IL 60613

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

900714386339  
30/20/03--010013001--\*\*150.00

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

Vice President

Abner Alvarez

7825 FAIRVIEW Dr. Bldg 25 Suite 101

Tamara Florida 33321

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

700014416777  
03/20/03--01070--007--\*\*150.00

TITLE

NAME

STREET ADDRESS

CITY - ST - 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:

Abner Alvarez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-17-03

Date

954/726-6354

Phone Number

CR2E034B (12/01)