

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 08, 2003 8:00 am
Secretary of State

01-08-2003 90043 009 ***150.00

DOCUMENT # P02000077119

1. Entity Name
O.E.M. IMPORT & EXPORT INC.



Principal Place of Business
14682 S.W. 50TH TERRACE
MIAMI FL 33183

Mailing Address
14682 S.W. 50TH TERRACE
MIAMI FL 33183

2. Principal Place of Business

2178 NW 87 AVE

3. Mailing Address

2178 NW 87 AVE

Suite, Apt. #, etc.

Miami Florida

Suite, Apt. #, etc.

City & State

City & State

Miami Florida

4. FEI Number

650583786

Applied For

Not Applicable

Zip

Country

33172 Dade

Zip

Country

33172 Dade

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

FERNANDEZ, OREL
14682 S.W. 50TH TERRACE
MIAMI FL 33183

7. Name and Address of New Registered Agent

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, registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Orel Fernandez PD, VD

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

01/03/2003

~~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 PD ☐ Delete
NAME FERNANDEZ, OREL
STREET ADDRESS 14682 S.W. 50TH TERRACE
CITY-ST-ZIP MIAMI FL 33183

TITLE VD ☒ Delete
NAME GARCIA, EFRAIN
STREET ADDRESS 14682 S.W. 50TH TERRACE
CITY-ST-ZIP MIAMI FL 33183

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD, VD ☐ Change ☒ Addition
NAME OREL Fernandez
STREET ADDRESS 14682 SW 50TH TERRACE
CITY-ST-ZIP Miami FL 33175

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

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

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

TITLE ☐ Change ☐ 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 an officer like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/03/2003 (305) 500 94 20

Date

Daytime Phone #

CR2E034 (10/02)