

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 06, 2003 8:00 am
Secretary of State

5/1

05-01-2003 90365 033 ***150.00

DOCUMENT # P02000083426

1. Entity Name
BERPUL CORP.



Principal Place of Business
7967 NW 64 ST.
MIAMI FL 33166

Mailing Address
7967 NW 64 ST.
MIAMI FL 33166

55046747



2. Principal Place of Business
11273 NW 55 Lane
Suite, Apt. #, etc.

3. Mailing Address
11273 NW 55 Lane
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Miami Florida
Zip 33178 Country U.S.A.

City & State
Miami Florida
Zip 33178 Country U.S.A.

4. FEI Number
22-3860923

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

AGUIRRE, RICHARD M
7310 NW 107 PLACE
MIAMI FL 33178

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

SIGNATURE

Signature of Florida or principal name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when re-registering)

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	PD	☐ Delete
NAME	AGUIRRE, RICHARD M	
STREET ADDRESS	7310 NW 107 PLACE	
CITY - ST - ZIP	MIAMI FL 33178	
TITLE	D	☐ Delete
NAME	BERNAL, CIRO	
STREET ADDRESS	11273 NW 55 LANE	
CITY - ST - ZIP	MIAMI FL 33178	
TITLE	D	☐ Delete
NAME	PULIDO, ROSALBA	
STREET ADDRESS	11273 NW 55 LANE	
CITY - ST - ZIP	MIAMI FL 33178	
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		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Change ☐ Addition
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 all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-29-03

Date

Daytime Phone

CR2E034 (10/02)