

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jun 02, 2003 8:00 am**  
**Secretary of State**

06-02-2003 90201 020 \*\*\*150.00

**DOCUMENT #** P02000108095

**1. Entity Name**

CATALINA M. RAMIREZ, PA



**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**

8801 NW 78TH PLACE AP 395

**3. Mailing Address**

SAME

Suite, Apt. #, etc.

APT 395

Suite, Apt. #, etc.

**City & State**

TAMARAC, FLORIDA

**City & State**

**Zip**

33321

**Country**

USA

**Country**

**4. FEI Number**

03-0487361

**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**

RODRIGUEZ, RAFAEL J

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

701 N STATE ROAD 7

**City**

HOLLYWOOD

**FL**

**Zip Code**

33021

**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**

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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** PSD  
**NAME** RAMIREZ, CATALINA  
**STREET ADDRESS** 8801 NW 78TH PLACE, APT. 395  
**CITY - ST - ZIP** TAMARAC, FL 33321

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IN THIS SPACE**

**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 on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

*Catalina Ramirez H*

CR2E034B (1/2/02)

**RJR ACCOUNTING SERVICES**  
**ACCOUNTING/INCOME TAX**

*Attachment #*

**Rafael J. Rodriguez**  
Accountant & Financial  
Consultant

*80123830*  
*PO 2000108095*

Divisions Of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500

Reference  
Catalina M Ramirez, PA  
8801 NW 78th Place, Apt 395  
Tamarac, FL 33321

UBR 2003

Enclosed is a Ck from First Union Ntl bank (Wachovia Bank, # 1301)  
the amount of \$150.

We are paying late the UBR 2003, due to the fact that the  
forms were never received by the Officers. Please accept our  
payment in order to keep the Corp active and in good standing

Thanks

Very truly yours

*Rafael J. Rodriguez*  
Rafael J Rodriguez  
Retired Certified Internal Auditor

\*May 29, 2003

*cc: Catalina Ramirez*