

FILED
Jul 25, 2003 8:00 am
Secretary of State

07-25-2003 90088 025 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000116073

1. Entity Name

FAMILY MORA DOLLAR DISCOUNT CORP.

90146576

2221 S.W. 67 AVENUE
MIAMI, FL 33155

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MIAMI, FL 33155

2. Principal Place of Business

2221 S.W. 67 AVENUE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FLORIDA

City & State

4. FEI Number

32-0039237

Applied For

Not Applied

Zip

33155

Country

US

Zip

Country

US

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

7. Name and Address of Current Registered Agent

Name

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

City

FL

Zip Code

MORA, IDELGRADE
550 N.W. 51 AVENUE, #39
MIAMI, FL 33126

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 title if applicable

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

DATE

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 1 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT MORA, IDELGRADE 550 N.W. 51 AVENUE MIAMI, FL 33126	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 attachment with an address. ☐ I am not empowered.

SIGNATURE:

[Signature] IDELGRADE MORA (President) 7/21/03 (86) 357-642

Attached +

**Family Mora Dollars Discount
Corp.**

90146576

FF-2000116073

July 8, 2003

Division of Corporations
P.O. BOX 6327
Tallahassee, FL 32314

Dear Sir or Madam:

Please be advised that we did not receive any correspondence from your office, hence why the 2003 filing fee was overlooked. Enclosed please find a check in the amount of \$150.00 for the 2003 Uniform Business Report fee. If you should have any questions or require additional information, do not hesitate to contact the undersigned.

Sincerely,

[Signature] (President)

Idelgrade Mora
Family Mora Dollars Discount Corp.