

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jul 10, 2001 8:00 am
Secretary of State

07-10-2001 90112 011 ***550.00

0044781 AV

DOCUMENT # P92000013436

1. Entity Name

219 PHOENETIA COMPANY

Principal Place of Business

**4620 GRANADA BOULEVARD
CORAL GABLES FL 33146-1248**

Mailing Address

**4620 GRANADA BOULEVARD
CORAL GABLES FL 33146-1248**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4705 GRANADA BLVD.

Suite, Apt. #, etc.

3. Mailing Address

4705 Granada Blvd.

Suite, Apt. #, etc.

City & State

Coral Gables FL

City & State

Coral Gables FL

Zip

33146

Country

Zip

33146

Country

4. FEI Number

65-0379116

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required****6. Name and Address of Current Registered Agent****CARRERA-JUSTIZ, SHEILA C
4620 GRANADA BOULEVARD
CORAL GABLES FL 33146****7. Name and Address of New Registered Agent**

Name

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

4705 Granada Blvd.

City

Coral Gables**FL**

Zip Code

33146

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 reinstating)

DATE

7/6/019. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
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 **P** ☐ Delete
NAME **CARRERA-JUSTIZ, SHEILA C**
STREET ADDRESS **4620 GRANADA BOULEVARD**
CITY-ST-ZIP **CORAL GABLES FL 33146**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
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CITY-ST-ZIPTITLE ☐ Delete
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CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **4705 GRANADA BLVD.**
CITY-ST-ZIP **CORAL GABLES, FL 33146**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/6/01

CR2E034 (5/01)