2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachi

SIGNATURE

FILED DOCUMENT # P93000014304 Apr 24, 2000 8:00 am Secretary of State ROMI'S EXPRESS, INC. 04-24-2000 90068 006 ***150.00 Principal Place of Business Mailing Address 1757 NW 79TH AVE 1757 MW 79TH AVE MIAMI FL 33126 MIAMI FL 33126-1112 2. Principal Place of Business 3. Mailing Address Suite. Apt. #. etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0390661 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FMR CORPORATION MONTEJO, ISABEL C 1200 SOUTHWEST 142ND COURT **MIAMI FL 33184** 401 S.W. 27TH AVENUE Zip Code 33135 MIAMI 8. The above named exity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE e of registered (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Atter MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. P=PRESIDENT, SEC, DIRECTOR ☐ Delete TITLE TITLE GIL, ROSALBA GIL. ROSALBA NAME NAME STREET ADDRESS 420 S. HINDRY AVE., UNIT F STREET ADDRESS 420 SOUTH HINDRY AVENUE INGLEWOOD CA 90301 CITY-ST-7IP CITY-ST-ZIP INGLEWOOD, CALIFORNIA ☐ Change Addition **X**XDelete TITLE TITLE NAME MONTEJO, ISABEL C NAME STREET ADDRESS STREET ADDRESS 1200 SOUTHWEST 142ND COURT CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33184** Addition D=DIRECTOR, VICE PRES., TREASURER98 ☐ Delete TITLE BETHENCOURT, MIRIAM NAMÉ BETHENCOURT, MIRIAM STREET ADDRESS STREET ADDRESS **420 SOUTH HINDRY AVENUE** 420 S. HINDRY AVE., UNIT F CITY-ST-ZIE CITY-ST-ZIP INGLEWOOD CA 90301 INGLEWOOD, CALIFORNIA 90301 ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 suppliemental 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 at 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