Daytime Phone #

2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 30, 2001 8:00 am Secretary of State DOCUMENT # **P93000016280** 1. Entity Name O & H INTERNATIONAL, INC. 03-30-2001 90341 020 ***150.00 Principal Place of Business Mailing Address 2525 NW 18 TERR 7891 W. FLAGER ST. MIAM! FL 33125 PMB 285 LIS **MIAMI FL 33144** US 2. Principal Place of Business 3. Mailing Address N.W. 7ST 2238 2238 N.W. 75T Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State CH & State 4. FEI Number Applied For 65-0392276 Not Applicable 33125 33125 \$8.75 Additional USA 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RODRIGUEZ, NIURKA M Street Address (P.O. Box Number is Not Acceptable) 812 NW 135TH ST **MIAMI FL 33182** Zip Code FL 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME RODRIGUEZ, NIURKA M NAME STREET ADDRESS STREET ADDRESS 812 NW 135TH CT CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Change Addition TITLE ☐ Delete TITLE NAME HENRY TEJEDA NAME STREET ADDRESS 812 NW 135TH CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition TITLE Delete TITLE NAME RODRIGUEZ," NIURKA M NAME STREET ADDRESS 812 NW 135TH CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Delete TITLE ☐ Change Addition TITLE **OMAR RODRIGUEZ** NAME NAME STREET ADDRESS STREET ADDRESS 812 NW 135TH CT CITY-ST-ZIP CITY-ST-ZIP MIAMI FL V. PRESIDENT Addition TITLE ☐ Delete TITLE ☐ Change JULIO HERNANDEL NAME NAME STREET ADDRESS STREET ADDRESS 132 CT. 769 N.W. CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition 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 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: