

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 01, 2001 8:00 am**  
**Secretary of State**

02-01-2001 90072 038 \*\*\*150.00

0175418

**DOCUMENT # P94000010640**

1. Entity Name  
**201 CORPORATION**

Principal Place of Business  
**3111 N.W. 27TH AVE.**  
**MIAMI FL 33142**

Mailing Address  
**3111 N.W. 27TH AVE.**  
**MIAMI FL 33142**

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0476320**

Applied For  
 Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required

DO NOT WRITE IN THIS SPACE



**6. Name and Address of Current Registered Agent**

**SALVATIERRA, CARLOS**  
**3111 N.W. 27TH AVE.**  
**MIAMI FL 33142**

**7. Name and Address of New Registered Agent**

Name  
**GILBERTO HERNANDEZ**

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

**3111 N.W. 27th Avenue**

City  
**Miami**

FL

Zip Code  
**33142**

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

**JAN. 25, 2001**

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	SALVATIERRA, CARLOS	3111 N.W. 27TH AVE.	MIAMI FL 33142	<input type="checkbox"/>
V	PIERRE-LOUIS, FERNAND	3111 N.W. 27TH AVE.	MIAMI FL 33142	<input type="checkbox"/>
S	LOPEZ, ORLANDO	3111 N.W. 27TH AVE.	MIAMI FL 33142	<input type="checkbox"/>
T	FINDER, AMI	3111 N.W. 27TH AVE.	MIAMI FL 33142	<input type="checkbox"/>
D	PEREZ, AMERICO	3111 N.W. 27TH AVE.	MIAMI FL 33142	<input type="checkbox"/>
				<input type="checkbox"/>

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

**ORLANDO LOPEZ, S.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1-25-01 305.885.0000**

Date

Daytime Phone #

CR2E034 (10/00)