## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

## P94000054699 DOCUMENT #

1. Entity Name

THE FORCE REALTY, INC.



## **FILED** Jan 13, 2003 8:00 am Secretary of State 01-13-2003 90362 047 \*\*\*150.00

<u></u>			GOO WE TRU				
Principal Place of Business 7755 NW 146 ST MIAMI LAKES FL 33016		Mailing Address 7755 NW 146 ST MIAMI LAKES FL 33016		I FORTHER THE COURT BIRT	II <b>Br</b> iii <b>Br</b> iii <b>Br</b> iif <b>Br</b> iid Blei	ii <b>Bisin B</b> irna	48118   1911   1881
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Number 60-55!	h(1-5555(h))		pplied For
Zip	Country	Zip	Country	5. Certificate of Status De		8.75 Ad	
	6. Name and Address of Curren	t Registered Agent		7. Name and Address of		•	
CANALS,	DICK	~ ~ ~ ~	Name	The water	r		
6315 NW			Street Addres	s (P.O. Box Number is Not Acc	ceptable)		
MIAMI FL				<del></del>	·		
INICANI I L	30013						
			City	-	FL	Zip Cod	ie
8. The above the obligat	e named entity submits this statement f tions of registered agent.	or the purpose of changir	ng its registered office or regis	tered agent, or both, in the Sta	te of Florida. I am fan	niliar with,	and accept
CIGITATONE.	Signature, typed or printed name of registered agen	and title if applicable.	(NOTE: Registered Agent signature requ	ired when reinstating)	DATE	<del></del> -	
After Make Check	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of			9. Election Campa Trust Fund Con			May Be
10. 🕏	OFFICERS AND	***	11.	ADDITIONS/CHANGES 1	O OFFICERS AND D	IRECTOR:	S IN 11
TITLE' NAME STREET ADDRESS CITY-ST-ZIP	Rodriguez, Teresa M 3495 w 13th Ave Hialeah Fl 33012	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Г	Change	Addition
STREET ADDRESS	s Rodriguez, Ivette 3495 w 13th Ave Hialeah fl 33012	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition
TITLE NAME		☐ Delete	TITLE NAME			] Change	Addition
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TITLE NAME Street Address City-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			] Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	:	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition
of the corp	ertify that the information supplied with on this report or supplemental report is oration or the receiver or trustee empo or on an attachment with an address, v	wered to execute this rop	ort on required by Chapter 00	ection 119.07(3)(i), Florida Sta same legal effect as if made u 17, Florida Statutes; and that my	tutes. I further certify t under oath; that I am a y name appears in Blo	that the inf in officer of ock 10 or f	ormation or director Block 11 if

SIGNATURE: