

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000077495

1. Entity Name

COELLO-BASURTO, CORP.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90291 009 ***150.00

Principal Place of Business

2742 S.W. 8TH STREET
STE # 22
MIAMI FL 33135

Mailing Address

2742 S.W. 8TH STREET
SUITE NO. 18 22
MIAMI FL 33135

2. Principal Place of Business

2742 S.W. 8TH ST
Suite, Apt. #, etc.
Ste. 22.

3. Mailing Address

2742 S.W. 8TH ST
Suite, Apt. #, etc.
SUITE 22.

City & State

MIAMI FL 33135-4612

Zip

33135

Country

Dade.

City & State

MIAMI FL 33135-4612

Zip

33135

Country

Dade.

4. FEI Number

65-0528424

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BASURTO, ANA M
2742 SW 8 ST STE # 22
MIAMI FL 33135

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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	D	<input type="checkbox"/> Delete
NAME	BASURTO, ANA M	
STREET ADDRESS	2742 SW 8 ST STE # 22	
CITY - ST - ZIP	MIAMI FL 33135	
TITLE	VP	<input type="checkbox"/> Delete
NAME	BASURTO, ROSA JENNY	
STREET ADDRESS	2742 SW 8 ST STE # 22	
CITY - ST - ZIP	MIAMI FL 33135	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	2742 S.W. 8th St Ste 22	
CITY - ST - ZIP	MIAMI FL 33135	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	2742 S.W. 8th St Ste 22	
CITY - ST - ZIP	MIAMI FL 33135	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Ana Maria Basurto

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/17/01

Date

305.6491825

Daytime Phone #

CR2E034 (10/00)