

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000092070

1. Entity Name

H.R.M.C. INVESTMENTS, INC.

Principal Place of Business

~~16023 N.W. 83RD COURT~~
~~MIAMI FL 33016~~
~~US~~

Mailing Address

~~16023 N.W. 83RD COURT~~
~~MIAMI FL 33016~~
~~US~~

2. Principal Place of Business

2671 W 76th ST
Suite, Apt. #, etc.

3. Mailing Address

2671 W 76th ST
Suite, Apt. #, etc.

City & State

Hialeah, FL

City & State

Hialeah FL

4. FEI Number

65-0547012

Applied For

Not Applicable

Zip

33016

Country

U.S.A

Zip

33016

Country

U.S.A

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~LOPEZ, ABDEL~~
~~16023 NW 83 CT~~
~~MIAMI FL 33016~~

7. Name and Address of New Registered Agent

Name ~~LOPEZ, YIDA ALFONSO~~
Street Address (P.O. Box Number is Not Acceptable)

2671 W 76 ST

City

Hialeah

FL

Zip Code

33016

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, 2002 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 checked="" type="checkbox"/> Delete
NAME	LOPEZ, ABDEL	
STREET ADDRESS	16023 NW 83RD CT	
CITY-ST-ZIP	MIAMI FL 33016	
TITLE	D	<input type="checkbox"/> Delete
NAME	LOPEZ, YIDA A	
STREET ADDRESS	16023 N.W. 83RD COURT	
CITY-ST-ZIP	MIAMI FL 33016	
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 type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	LOPEZ YIDA ALFONSO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2671 W 76th ST	
STREET ADDRESS	Hialeah, FL 33016	
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		
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)(1), 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 and all other information empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/18/02

Daytime Phone #

FILED
Apr 10, 2002 8:00 am
Secretary of State

02-13-2002 90206 031 ***158.75

04-10-2002 90665 025 ***158.75



DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)