

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # [P9500000295412]?

1. Entity Name

GOLD CUP REAL ESTATE COMPANY

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90948 028 ***150.00

Principal Place of Business

Mailing Address

10201 HAMMOCKS BLVD.
SUITE 153-238
MIAMI FL 33196
US

10201 HAMMOCKS BLVD.
SUITE 153-238
MIAMI FL 33196-4712
US

100842

2. Principal Place of Business

3. Mailing Address

2665 SOUTH BAYSHORE DRIVE

Suite Apt. # etc.
703

Suite Apt. #, etc.

City & State

COCONUT GROVE FL

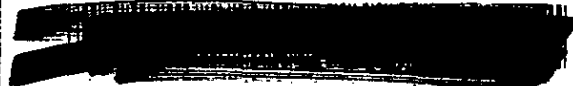
City & State

Zip
33123

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number -65-0049901 650551245 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MUR, LAZARO J
8400 N.W. 52 STREET
SUITE 207
MIAMI FL 33166

Name MUR, LAZARO J.

Street Address (P.O. Box Number is Not Acceptable)
2665 SOUTH BAYSHORE DRIVE

Suite 703

City COCONUT GROVE

FL

Zip Code 33133

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

4/28/00

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, 2000 Fee will be \$350.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DBS GONZALEZ, MIGUEL A % 8400 N.W. 52 STREET, #207 MIAMI FL 33166	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	LAZARO MUR 40 2665 SOUTH BAYSHORE DRIVE Suite 703 COCONUT GROVE FL 33133	☒ Change ☐ Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Miguel A. GONZALEZ 2665 S. BAYSHORE DRIVE STE #703 COCONUT GROVE, FLA 33133	☒ Change ☐ Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Add

13. I hereby certify that the information supplied with this filing does not qualify for the status each 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, changed, or on an attachment with an address, with either of the above.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00