

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000017393

1. Entity Name

HOMELAND INVESTMENT COMPANY

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90025 008 ***158.75

Principal Place of Business

Mailing Address

P.O. BOX 652137
MIAMI FL 33265-2137
US

PO BOX 652137
MIAMI FL 33265-2137
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0571538

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

Name Nilo A. Hernandez

Street Address (P.O. Box Number is Not Acceptable)
10833 SW 142nd Ct.

City MIAMI

FL

Zip Code 33186

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]

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1-12-00

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DV
NAME GOMEZ, NICOLAS
STREET ADDRESS 12700 NW 11 TERR
CITY-ST-ZIP MIAMI FL

☒ Delete

2ND
NOTICE!

TITLE DPT
NAME HERNANDEZ, NILO A
STREET ADDRESS 10833 SW 142 CT
CITY-ST-ZIP MIAMI FL 33186

☐ Delete

TITLE DVS
NAME AMADOR, ABEL
STREET ADDRESS 341 SW 135 AVE
CITY-ST-ZIP MIAMI FL 33184

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE PPRESIDENT
NAME NILO A. HERNANDEZ
STREET ADDRESS 10833 SW 142 CT.
CITY-ST-ZIP MIAMI FL 33186

☒ Change ☐ Addition

TITLE DSECRETARY
NAME ABEL AMADOR
STREET ADDRESS 341 SW 135 AVE
CITY-ST-ZIP MIAMI FL 33184

☒ Change ☐ Addition

TITLE DIRECTOR VICE-PRESIDENT
NAME MARGARITA HERNANDEZ
STREET ADDRESS 10833 SW 142 CT.
CITY-ST-ZIP MIAMI FL 33186

☐ Change ☒ Addition

TITLE DIRECTOR TREASURER
NAME SILVIA C. AMADOR
STREET ADDRESS 341 SW 135 AVE
CITY-ST-ZIP MIAMI FL 33184

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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: [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SECRETARY 1-12-00 305-385-9400

CR2E034 (9/99)