

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 11, 2001 8:00 am**  
**Secretary of State**

05-11-2001 90055 044 \*\*\*150.00

**DOCUMENT # P95000024744**

1. Entity Name

**SERVIMEX, INC.**

Principal Place of Business

Mailing Address

**15485 EAGLE NEST LANE**  
**120**  
**MAHI LAKES FL 33014**  
**US**

**15485 EAGLE NEST LANE**  
**120**  
**MAHI LAKES FL 33014**  
**US**

2. Principal Place of Business

**15485 EAGLE NEST LANE**

3. Mailing Address

**160 21 NW 79 CR**

Suite, Apt. #, etc.

**SUITE 120**

Suite, Apt. #, etc.

City & State

**MIAMI LAKES FLORIDA**

City & State

**MIAMI LAKES FLORIDA**

Zip  
**33014**

Country  
**DADE**

Zip

**33016**

Country

**DADE**

4. FEI Number **65-0574391**

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

**SILVA, JUAN CARLOS**  
**7110 FAIRWAY DR.**  
**#9**  
**MIAMI LAKES FL 33014**

**NEW ADDRESS**  
**JUAN CARLOS SILVA**  
**160 21 MW 79CR.**  
**MIAMI LAKES FL**  
**33016**

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

*President*

*4/26/2001*

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD</b> <b>SILVA, JUAN CARLOS</b> <b>7110 FAIRWAY DRIVE</b> <b>MIAMI LAKES FL 33014</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PRESIDENT</b> <b>JUAN CARLOS SILVA</b> <b>160 21 N.W. 79 CR</b> <b>MIAMI LAKES FL. 33016</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>STOCKHOLDER 50%</b> <b>MARIA VICTORIA GALINDO</b> <b>8324 NW 7TH STREET #13</b> <b>MIAMI LAKES FLORIDA 33125</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**04/27/2001**

Date

Daytime Phone #

CR2E034 (10/00)