

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000030751 (8)**

1. Corporation Name:

UNITED DEVELOPERS ENTERPRISES, CO.



Principal Place of Business:

**540 N.W. 114TH AVENUE
MIAMI FL 33172**

Mailing Address:

**540 N.W. 114TH AVENUE
MIAMI FL 33172**

2. Principal Place of Business:

2a. Mailing Address:

21. State: **Appl. to:**

26. State: **Appl. to:**

22. City & State:

27. City & State:

23. Zip: Country:

28. Zip: Country:

24. Zip: Country:

29. Zip: Country:

9. Name and Address of Current Registered Agent

**ZALDIVAR, FIDEL A
540 N.W. 114TH AVENUE
MIAMI FL 33172**

3. Date Incorporated or Qualified

3a. Date of Last Report

04/19/1995

4. FEI Number

Applied For
Not Applicable

65-0577934

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.06(2) and 607.1503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.06(3), Florida Statutes.

SIGNATURE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

DATE

12.

**PD
ZALDIVAR, FIDEL A
540 N.W. 114TH AVENUE
MIAMI FL 33172
STD
CARRODEGUAS, VICENTE
540 N.W. 114TH AVENUE
MIAMI FL 33172**

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13.

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP
5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY-STATE-ZIP
9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY-STATE-ZIP
13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY-STATE-ZIP
17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY-STATE-ZIP

☐ Change ☐ Addition

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14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information also indicated on this annual report or supplemental annual 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 person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, and that I am in agreement with an address.

SIGNATURE:

Fidel A. Zaldivar (pres.)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/96 (305) 223-2759
DATE

CR2E034 (12/95)