

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000046781

1. Entity Name

FLORIDA SUNSET REALTY, INC.

**FILED**  
**May 17, 2001 8:00 am**  
**Secretary of State**

05-17-2001 91317 035 \*\*\*150.00

Principal Place of Business

2500 SW 107TH AVENUE, #37  
MIAMI FL 33165

Mailing Address

2500 SW 107TH AVENUE, #37  
MIAMI FL 33165

C0066816



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 65-0880843

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

RAMIREZ, ALBERTO  
2500 SW 107TH AVENUE, #37  
MIAMI FL 33165

7. Name and Address of New Registered Agent

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

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

TITLE D  
NAME GONZALEZ, EVA  
STREET ADDRESS 8861 SW 17TH STREET  
CITY-ST-ZIP MIAMI FL 33165 ☐ Delete

TITLE P  
NAME DOMINGUEZ, MIRIAN EVA  
STREET ADDRESS 13460 SW 32ND STREET  
CITY-ST-ZIP MIAMI FL 33175 ☐ Delete

TITLE VP  
NAME LOPEZ, ROBERT  
STREET ADDRESS 12855 SW 72ND TERRACE  
CITY-ST-ZIP MIAMI FL 33183 ☐ 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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: Eva Gonzalez  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(305) 485-0094

CR2E034 (10/00)

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