

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2002 8:00 am
Secretary of State

03-28-2002 90159 002 ***150.00

0137274 AV

DOCUMENT # P95000050180

1. Entity Name

ALTEX INTERNATIONAL, INC.

Principal Place of Business

**5596 NW 161ST STREET
HIALEAH FL 33014
US**

Mailing Address

**5596 NW 161ST STREET
HIALEAH FL 33014
US**

2. Principal Place of Business

5413 N.W. 163RD ST.

3. Mailing Address

5413 N.W. 163RD ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami FLA

City & State

Miami

Zip

33014

Country

U.S.A.

Zip

33014

Country

U.S.A.

4. FEI Number

65-0594743

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HERNANDEZ, EFRIN
5596 NW 161 ST
HIALEAH FL 33014**

7. Name and Address of New Registered Agent

Name **HERNANDEZ EFRIN**

Street Address (P.O. Box Number is Not Acceptable) **8161 N.W. 197th Street**

City

Miami

FL

ZIP Code

33015

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

2/28/02

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, 2002 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 **PTD** ☐ Delete
NAME **HERNANDEZ, EFRIN A.**
STREET ADDRESS **2750 NE 183RD ST., APT. 1006**
CITY-ST-ZIP **AVENTURA FL 33160**

TITLE **S** ☐ Delete
NAME **HERNANDEZ, BELKIS**
STREET ADDRESS **5596 NW 161 STREET**
CITY-ST-ZIP **HIALEAH FL 33014**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTD** ☐ Change ☐ Addition
NAME **HERNANDEZ EFRIN**
STREET ADDRESS **8161 N.W. 197th Street**
CITY-ST-ZIP **Miami, FLA. 33015**

TITLE **S** ☐ Change ☐ Addition
NAME **HERNANDEZ BELKIS**
STREET ADDRESS **8161 N.W. 197th Street**
CITY-ST-ZIP **Miami FLA. 33015**

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

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

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/28/02

CR2E034 (9/01)