

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 29, 2002 8:00 am
Secretary of State

07-29-2002 90003 020 ***558.75

DOCUMENT # P95000071375

1. Entity Name

MASART IMPORTING COMPANY OF FLORIDA, INC.

Principal Place of Business

**8510 N.W. 66TH STREET
 MIAMI FL 33166**

Mailing Address

**8510 N.W. 66TH STREET
 MIAMI FL 33166**

2. Principal Place of Business

240 NORTH DIXIE HWY. 16-17

3. Mailing Address

240 NORTH DIXIE HWY

Suite, Apt. #, etc.

16-17

Suite, Apt. #, etc.

16-17

City & State

HOLLYWOOD FL

City & State

HOLLYWOOD FL.

4. FEI Number

59-3341980

Applied For

Not Applicable

Zip

33020

Country

FLORIDA

Zip

33020

Country

FLORIDA

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEVY, ELIAS

**8510 NW 66 ST
 MIAMI FL 33166**

7. Name and Address of New Registered Agent

Name

LEVY, ELIAS

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

240 NORTH DIXIE HWY BAY 16-17

City

HOLLYWOOD

FL

Zip Code

33020

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **P** ☐ Delete
 NAME **COMODAS S.A. DE C.V., CONFECCIONES**
 STREET ADDRESS **8510 N.W. 66TH STREET**
 CITY-ST-ZIP **MIAMI FL 33166**

TITLE ☒ Change ☐ Addition
 NAME **240 NORTH DIXIE HWY**
 STREET ADDRESS **HOLLYWOOD, FL - 33020**
 CITY-ST-ZIP

TITLE **VP** ☐ Delete
 NAME **LEVY, RAFAEL**
 STREET ADDRESS **8510 N.W. 66TH STREET**
 CITY-ST-ZIP **MIAMI FL 33166**

TITLE ☒ Change ☐ Addition
 NAME **240 NORTH DIXIE HWY**
 STREET ADDRESS **HOLLYWOOD, FL - 33020**
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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 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 REQUIRED**

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/25/02 (305)4680022

Date

Daytime Phone #

CR2E034 (4/02)