2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2001 8:00 am
Secretary of State
05-02-2001 90042 013 ***158.75

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DOCUMENT # P95000072393

1. Entity Name
HIALEAH GARDENS CHAMBER OF COMMERCE & WEST INDUSTRIES INC.

Principal Place of Business	Mailing Address
8074 NW 103 ST BAY 5 HIALEAH GARDENS FL 33018	8074 NW 103 ST BAY 5 HIALEAH GARDENS FL 33018

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
	8074 NW 103 ST
Suite, Apt. #, etc.	Suite, Apt. #, etc. BAY 6 & 7
City & State	City & State HIALEAH GARDEN FL
Zip / Country	Zip 33018 / Country

4. FEI Number 65-0752768 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SANTALLA, OSCAR
7295 WEST 2ND COURT
HIALEAH FL 33014

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.

OSCAR SANTALLA PD
SIGNATURE [signature] 4/20/2001
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	PD	☐ Delete
NAME	SANTALLA, OSCAR	
STREET ADDRESS	7295 WEST 2ND COURT	
CITY-ST-ZIP	HIALEAH FL 33014	
TITLE	STD	☐ Delete
NAME	LORENZO, JANE M	
STREET ADDRESS	7295 WEST 2ND COURT	
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		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (10/00)

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] April 20-2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #