

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000079824

1. Entity Name

C.B.R. GROUP, INC.

Principal Place of Business

555 NE 15TH ST.  
SUITE 100  
MIAMI FL 33132

Mailing Address

555 NE 15TH ST.  
SUITE 100  
MIAMI FL 33132-1455

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

3247 NE 168 ST

N. MIAMI BEACH, FL 33160

33160

6. Name and Address of Current Registered Agent

BALLESTEROS, CHRISTIAN  
3675 N. COUNTRY CLUB DR.  
PH-10  
AVENTURA FL 33180

7. Name and Address of New Registered Agent

Name CHRISTIAN BALLESTEROS

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

3247 NE 168 ST

City

N MIAMI BEACH

FL

Zip Code

33160

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.

CHRISTIAN BALLESTEROS, DIRECTOR

(NOTE: Registered Agent signature required when reinstating)

4/20/00

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, 2000 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 BALLESTEROS, CHRISTIAN  
STREET ADDRESS 13237 SW 10TH LANE  
CITY-ST-ZIP MIAMI FL 33184

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D  
NAME BALLESTEROS CHRISTIAN  
STREET ADDRESS 3247 NE 168 ST  
CITY-ST-ZIP N. MIAMI BEACH FL. 33160

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRISTIAN BALLESTEROS, D

4/20/00 (305) 354 7222

Date

Daytime Phone #

FILED  
May 11, 2000 8:00 am  
Secretary of State

05-11-2000 90306 021 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0727992

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

CR2E034 (9/99)