

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2002 8:00 am
Secretary of State

03-22-2002 90060 009 ***158.75

DOCUMENT # P96000007362

1. Entity Name

PUIG & MARTINEZ ARCHITECTS & PLANNERS, INC.

Principal Place of Business

**7000 SW 97TH AVE
 STE 104
 MIAMI FL 33173
 US**

Mailing Address

**7000 SW 97TH AVE
 SUITE 104
 MIAMI FL 33173
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2720 SW 97th Ave

3. Mailing Address

2720 SW 97th Ave

Suite, Apt. #, etc.

Suite 201

Suite, Apt. #, etc.

Suite 201

City & State

Miami, FL

City & State

Miami, FL

Zip

33165

Country

US

Zip

33165

Country

US

4. FEI Number

65-0644727

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☒

\$8.75

Additional Fee Required

6. Name and Address of Current Registered Agent

**REINALDO, MARTINEZ
 7000 SW 97TH AVE
 SUITE 104
 MIAMI FL 33173**

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, 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 **D** ☐ Delete
 NAME **MARTINEZ, REINALDO**
 STREET ADDRESS **7000 SW 94TH AVE, STE 104**
 CITY-ST-ZIP **MIAMI FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☒ Change ☐ Addition
 NAME **Martinez, Reinaldo**
 STREET ADDRESS **2720 SW 97th Ave, Ste 201**
 CITY-ST-ZIP **Miami, FL 33165**

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

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/01 (35)

Date

Daytime Phone #

CR2E034 (9/01)