

2000 UNIFORM BUSINESS REPORT (UBR)

4/12

FILED
May 19, 2000 8:00 am
Secretary of State

04-12-2000 90032 015 ***150.00

DOCUMENT # P96000016892

1. Entity Name

UVA INVESTMENTS CORP.

Principal Place of Business

15956 S.W. 137 AVENUE
MIAMI, FL 33177

Mailing Address

15956 S.W. 137 AVENUE
MIAMI, FL 33177

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0655661

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CANJURA, ODALYS
13800 S.W. 152 STREET
MIAMI, FL 33177

7. Name and Address of New Registered Agent

Name

GARCIA, ODALYS

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

15956 SW 137 Ave

City

Miami

FL

Zip Code

33137

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, 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 PD ☐ Delete
NAME GARCIA, VICENTE
STREET ADDRESS 13800 S.W. 152 STREET
CITY-ST-ZIP MIAMI, FL 33177

TITLE STD ☐ Delete
NAME RODRIGUEZ, JORGE
STREET ADDRESS 13800 S.W. 152 STREET
CITY-ST-ZIP MIAMI, FL 33177

TITLE VD ☐ Delete
NAME CANJURA, ODALYS
STREET ADDRESS 13800 S.W. 152 STREET
CITY-ST-ZIP MIAMI, FL 33177

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
NAME GARCIA, ODALYS
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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: ODALYS GARCIA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(305) 256-0089

Daytime Phone #

CR2E034 (9/99)