

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90057 037 ***150.00

DOCUMENT # P96000020312

1. Entity Name

ZOOBOTANICA CORPORATION

Principal Place of Business

~~1320 WEST 35TH STREET~~
~~HIALEAH FL 33012~~

Mailing Address

~~1320 WEST 35TH STREET~~
~~HIALEAH FL 33012~~

2. Principal Place of Business

3320 OAK AVE

3. Mailing Address

3320 OAK AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

COCONUT GROVE

City & State

COCONUT GROVE

Zip

33133

Country

USA

Zip

33133

Country

USA

4. FEI Number

65-0646610

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MONTEJO, ALBERT

~~1320 WEST 35TH STREET~~

~~HIALEAH FL 33012~~

7. Name and Address of New Registered Agent

Name

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

3320 OAK AVE

City

COCONUT GROVE

FL

Zip Code

33133

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

03-04-02

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 **PD** ☐ Delete
 NAME **MONTEJO, ALBERT**
 STREET ADDRESS **1320 WEST 35TH STREET**
 CITY-ST-ZIP **HIALEAH FL 33012**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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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 **3320 OAK AVE**
 CITY-ST-ZIP **COCONUT GROVE, FL 33133**

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

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
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 NAME
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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

03-04-02
 Date Daytime Phone #

CR2E034 (9/01)

FOR FILING THE FLORIDA
CORPORATION ANNUAL REPORT

18-13
AND DATE THE REPORT IN BOX WHERE INDICATED BY A RED CHECK

A. SIGN
MART

A CHECK FOR \$15.00 PAYABLE TO DEPARTMENT OF STATE

C. MAIL

THE CHECK AND THE REPORT

IN THE ENCLOSED ENVELOPE

D. THE REPORT MUST BE