

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000038253

1. Entity Name

THE FAMILY INVESTMENT OF MIAMI, INC.

FILED
Mar 03, 2000 8:00 am
Secretary of State

03-03-2000 90198 021 ***150.00

Principal Place of Business

Mailing Address

2325 W 60TH STREET
E-107
HIALEAH FL 33016-4421

2325 W 60TH STREET
E-107
HIALEAH FL 33016-4498

2. Principal Place of Business

3. Mailing Address

6090 W 18 AVE

6090 W 18 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#234

#234

City & State

City & State

HIALEAH FL

HIALEAH FL

Zip

Country

Zip

Country

33012

USA

33012

USA

4. FEI Number

65-0687256

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HERRERA, CARLOS SR.
2325 W 60TH STREET
E-107
HIALEAH FL 33016-4421

same

Name

CARLOS HERRERA SR

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

6090 W 18 AVE #234

City

HIALEAH

FL

Zip Code

33012

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

Carlos Herrera SR

CARLOS HERRERA SR

1/14/2000

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

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	HERRERA, CARLOS SR.	
STREET ADDRESS	2325 W 60TH STREET E-107	
CITY-ST-ZIP	HIALEAH FL 33016-4421	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Carlos Herrera SR

President

1/14/2000

(305) 826-4264

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (9/99)