## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # **P96000050906** Mar 02, 2000 8:00 am 1. Entity Name **Secretary of State** UNQUERA ENTERPRISES, INC. 03-02-2000 90081 016 \*\*\*150.00 Mailing Address Principal Place of Business 2301 W 52ND ST 2301 W 52ND ST HIALEAH FL 33016 HIALEAH FL 33016-2008 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0678749 Not Applicable Country \$8,75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARQUEZ, JOSE M Street Address (P.O. Box Number is Not Acceptable) 782 NW LEJEUNE RD., STE. 548 MIAMI FL 33126-5536 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 (NOTE. Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change Addition ☐ Delete TITLE TITLE HERRAN, MANUEL A NAME NAME STREET ADDRESS STREET ADDRESS 8460 SW 5 ST. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33144 ☐ Change ☐ Addition ☐ Delete TITLE TITLE HERRAN, JOSE A NAME STREET ADDRESS 8455 GRAND CANAL DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33144 ☐ Change Addition ☐ Delete TITLE VALDES, DANIEL R NAME NAME STREET ADDRESS 9755 SW 62 ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33173** ☐ Addition ☐ Change TITLE ☐ Delete TITLE **GUERRA, JORGE** NAME NAME STREET ADDRESS STREET ADDRESS 8455 SW 58 ST. CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33173** ☐ Change Addition TITI F Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS 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: R-Coast | Day | Day | Proper |