

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000054332

1. Entity Name

KROSS INTERNATIONAL TRADE, INC.

FILED
Feb 07, 2000 8:00 am
Secretary of State

02-07-2000 90004 033 ***150.00

Principal Place of Business

Mailing Address

473 E. 11 STREET
HIALEAH FL 33011

473 E. 11 STREET
HIALEAH FL 33155-2411

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

8310 SW 27 Terr.

8310 SW 27 Terr.

City & State

City & State

Miami, FL

Miami, FL

Zip

Country

Zip

Country

33155

USA

33155

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HERNANDEZ, JEFFREY
473 E. 11 STREET
HIALEAH FL 33011

Name

Hernandez, Jeffrey ("same")

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

8310 SW 27 Terr.

City

Miami

FL

Zip Code

33155

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

Jeffrey Hernandez/President 1-24-00

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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
PT
HERNANDEZ, JEFFREY
473 E. 11 STREET
HIALEAH FL 33011

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
PS
HERNANDEZ, ELISA N
473 E. 11 STREET
HIALEAH FL 33011

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

TITLE ☐ Delete
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Elisa Hernandez

1-24-00

Date

305-222-4955

Daytime Phone #

CR2E034 (9/99)