

2000 UNIFORM BUSINESS REPORT (UBR)

Page 1 of 2

DOCUMENT # **P96000069406**

1. Entity Name

SUN ARTS OF MIAMI, INC.

Principal Place of Business

**7700 SW 36 ST
MIAMI FL 33155**

Mailing Address

**7700 SW 36 ST
MIAMI FL 33155**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**RITA BOSQUE
1110 SW 11 AVE
MIAMI FL 33145**

7. Name and Address of New Registered Agent

Name

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

City

FL

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

Rita Bosque

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!!! FEES \$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 **P/V P/ST**
STREET ADDRESS **RITA BOSQUE**
CITY-ST-ZIP **1110 SW 11 AVE
MIAMI FL, 33145**

TITLE ☐ Change ☐ Addition
NAME **300003491553--5**
STREET ADDRESS **-12/08/00--01034--007**
CITY-ST-ZIP ******\$15.00 ****\$15.00**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **Emilio Montero**
CITY-ST-ZIP **1110 SW 11 AVE
MIAMI FL, 33145**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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:

Rita Bosque

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

97-00 UBR TS

PA9620+2

SUN ARTS OF MIAMI, INC.
DOC.#P96000069406

P96-
69406

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A
CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY
UP-DATE THE ABOVE MENTIONED CORPORATION.

DUE TO A CHANGE OF PRINCIPAL AND MAILING ADDRESS I NEVER
RECEIVED FIRST NOR SECOND NOTICE OF SUCH REPORT.

PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN
ITS CURRENT STATUS. THANK IN ADVANCE FOR YOUR PROMPT
ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION
REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME AT THE NEW
ADDRESS LISTED IN THE ANNUAL REPORT .

CORDIALLY,

Rita Bosque
RITA BOSQUE
PRESIDENT