

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000079645

1. Entity Name
CECILIA MURIAS, INC.

FILED
Sep 11, 2000 8:00 am
Secretary of State

09-11-2000 90001 041 ***550.00

Principal Place of Business

380 E. 9TH STREET, #14
HIALEAH FL 33010

Mailing Address

380 E. 9TH STREET, #14
HIALEAH FL 33010

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 65-0697787

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

A0075710



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

POLANCO, RICHARD
2872 S.W. 34 AVE
MIAMI FL 33133

7. Name and Address of New Registered Agent

Name Miguel A. Murias

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

69 EAST 5TH AVE.

City Hialeah

FL

Zip Code 33010

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]*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/12/00
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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 NAME STREET ADDRESS CITY-ST-ZIP | DP MURIAS, MIGUEL A 69 EAST 5TH AVENUE HIALEAH FL 33010 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DV MURIAS, CECILIA R 69 EAST 5TH AVENUE HIALEAH FL 33010 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DT ROCA, MARIA E 415 E 52ND ST NEW YORK NY 10022 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-12-00

305-863-0319

CR2E034 (5/00)

Attachment Rec# P46000079645

MIRIAM DE TORO, P.A.

Certified Public Accountant

231 Altara Avenue

Coral Gables, FL 33146

Telephone 305/448-1648 Fax 305/448-3256

Date: 7/12/00

INSTRUCTION SHEET

U.S. PROFIT UNIFORM BUSINESS REPORT

Form

UBR

Client: CECILIA MURIAS, INC.

Year: 2000

General:

Retain the attached Taxpayer's Copy after noting on it the signature and mailing date of the enclosed original tax return.

Signature:

The original should be signed, title and dated by an officer of the corporation at the bottom of the page.

Payment:

The TAX DUE is payable to the DEPARTMENT OF STATE as follows:

\$ 550.00 by 9/13/00

Due Date:

Mail on or before 9/13/00

Mail to:

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Note: