

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90058 043 ***150.00

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1. Entity Name
CYNTHIA VARAT FLORAL DESIGN, INC.



Principal Place of Business
**11030 PARADELA
CORAL GABLES FL 33156
US**

Mailing Address
**11030 PARADELA ST.
CORAL GABLES FL 33156
US**

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 **65-0721981**

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

**VARAT, ANDREW
11030 PARADWLA STREET
CORAL GABLES FL 33156**

Name

• CYNTHIA VARAT •

8. The above named entity submits this statement for the purpose of changing its registered agent the obligations of registered agent.

SIGNATURE

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

(NOTE: Register

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11.

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
VARAT, CYNTHIA
11030 PARADELA ST
MIAMI FL 33156** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
VARAT, ANDREW
11030 PARADELA ST
MIAMI FL 33156** ☐ Delete

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cynthia Varat
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-03

(305) 661-0871
Date Daytime Phone #

Please note:
This business is
closing as of 12/31/02.
I am waiting to
receive the dissolution
form.

Thank you.

Cynthia Varat
(305) 661-0871

11030 Paradel Street • Coral Gables, Florida 33156

CR2E034 (10/02)