

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2002 8:00 am
Secretary of State
 05-05-2002 90077 013 ***150.00

DOCUMENT # P96000099742

1. Entity Name
CONFIDENCE ENTERPRISE INC.

Principal Place of Business
**14402 SW 111TH ST.
 MIAMI FL 33186**

Mailing Address
**14402 SW 111TH ST.
 MIAMI FL 33186**

2. Principal Place of Business
6521 S.W. 163 Court
 Suite, Apt. #, etc.

3. Mailing Address
6521 S.W. 163 Court
 Suite, Apt. #, etc.

City & State
Miami, Florida
 Zip
33193
 Country
U.S.A.

City & State
Miami, Florida
 Zip
33193
 Country
U.S.A.

4. FEI Number **65-0717036**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**MONTERROSA, RICARDO A
 14402 SW 111TH ST.
 MIAMI FL 33186**

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

(NOTE: Registered Agent signature required when reinstating)

4/13/02
 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 \$150.00
After May 1, 2002 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

TITLE
DPT
 NAME
MONTERROSA, RICARDO
 STREET ADDRESS
14402 SW 111TH ST.
 CITY-ST-ZIP
MIAMI FL 33186

☐ Delete

TITLE
DVS
 NAME
MONTERROSA, MARIA M
 STREET ADDRESS
14402 SW 111TH ST.
 CITY-ST-ZIP
MIAMI-FL-33186

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
Monterrosa Ricardo
 NAME
6521 S.W. 163 Court
 STREET ADDRESS
miami, FL 33193
 CITY-ST-ZIP

☒ Change ☐ Addition

TITLE
Monterrosa MARIA M
 NAME
6521 S.W. 163 Court
 STREET ADDRESS
miami, FL 33193
 CITY-ST-ZIP

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

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 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/02
 Date

Daytime Phone #

0295942 AV

CR2E034 (9/01)