2007

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000019013

FILED
Apr 11, 2007 8:00 am
Secretary of State

04-11-2007 90041 039 ***150.00

1. Entity Nam	ne							
Velez :	Imports, Inc.							
	DO NOT WRITE	IN THIS SPACE		_				
	DO NOT WATE	IN THIS STAGE			- arm262			
				İ	40057262			
	Place of Business	3. Mailing Address 22333 S.W.	· ·					
22333 Suite, Apt.	103rd Ct.							
. ,			DO NOT WRITE	IN THIS S	PACE			
City & State City & State Miami, FL Miami, FL					FEI Number			Applied For
Zip	Country	Miami, FL Zip	Country		-0731884		\$8.75	Not Applicable Additional
33190	USA.		USA		Certificate of Status Desired	Ш	Fee Re	quired
	DO NOT WRITE IN T	HIS SPACE	Name	7. Nan	ne and Address of Current F	Registere	i Agent	
	******		Velez,					
			Street Addre	ss (P.O. S.W.	Box Number is Not Acceptabl 103rd Ct.	e)		
						-		
			City				Zip C	ode
O The share			Miami			FL	33:	190
a. The above	named entity submits this statemer t the obligations of registered agent.	nt for the purpose of changir	ng its registered office o	r registe	red agent, or both, in the State	e of Florida	a.lam f	amiliar with,
·								
SIGNATURE	<u> </u>	 	<u></u>					·
	Signature, typed or printed name of regis	tered agent and title if applicable	e. (NOTE: Registered	Agent sig	nature required when reinstating)		DATE	
	After May 1, Fee is \$550.00				9. Election Campaign Fina			5.00 May Be
Make Check	Amended UBR is \$61.25 Payable to Florida Department of	State			Trust Fund Contribution.			Added to Fees
10.	OFFICERS AND D					_		
TITLE NAME	D/P		TITLE					
STREET ADDRESS	Velez, Victor 22333 S.W. 103r	NAME STREET ADDRESS						
CITY - ST - ZIP	Miami, FL 33190	CITY - ST - ZIP						
TITLE	D/S/T_		TITLE					
NAME	Mas, Frances 22333 S.W. 103r	.d C+	NAME					
STREET ADDRESS CITY - ST - ZIP	<u>Miami, FL</u> 33190	a cc.	STREET ADDRESS					
TITLE	1144111 11 33130		TITLE		 -			
NAME			NAME					
STREET ADDRESS CITY - ST - ZIP			STREET ADDRESS	٠,	O NOT MOTE IN	TUIC	004	OF
TITLE			TITLE		OO NOT WRITE IN	I HIS	SPA	CE
NAME			NAME					
STREET ADDRESS			STREET ADDRESS					
CITY - ST - ZIP		 	CITY - ST - ZIP					
TITLE NAME			TITLE					
STREET ADDRESS			STREET ADDRESS					
CITY - ST - ZIP		<u> </u>	CITY - ST - ZIP					
TITLE Name			TITLE					
STREET ADDRESS			STREET ADDRESS					
CITY - ST - ZIP			CITY - ST - ZIP					
an officer of	ertify that the information supplied wi n indicated on this report of supplem or director of the corporation or the re Block 10 or on an attack ment with a	ental report is true and acci eceiver or trustee empower	urate and that my signa ed to execute this report	hira chal	I have the sense level effect -	- 15		-Ab-, AbA I
SIGNATU	JRE:			z A	01/9-2007	305	-594	1-3908

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