

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P97000021231**

1. Entity Name

**STR IMPORT AND EXPORT CORP.**

Principal Place of Business

Mailing Address

**6963 N.W. 82nd Ave  
Miami, FL 33166**

2. Principal Place of Business

3. Mailing Address

State, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ELIAS A. MACHTA  
6963 N.W. 82nd Ave  
Miami FL 33166**

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]*

Signature of officer or director of registered agent and title if applicable.

(NOTE: Registered Agent signature required when amending)

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, 2001 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

**Pd**  
**ELIAZ A. MACHTA**  
**6963 N.W. 82nd Ave**  
**Miami FL 33166**

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☐ Change ☐ Addition

**600004548966**

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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:

Signature: [Signature]

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**1998-2001 UBR**

CP25034 (11/99)

252

Division of Corporations  
P.O. BOX 6327  
Tallahassee, FL 32314

Per instructions from Division of Corporations, I am attaching a check in the amount of \$ 600.00 for the annual report fee with my application.

I also state that I have not received any notice from the Division of Corporations in respect with my Corporation **STR IMPORT AND EXPORT, CORP.**

Thank you for your courtesy in this matter.



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**ELIAS A. MACHTA**  
**PRESIDENT**