

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 15, 2000 8:00 am**  
**Secretary of State**

08-15-2000 90014 047 \*\*\*150.00

**DOCUMENT # P97000022146**

1. Entity Name  
**OLEO MASTERS, INC.**

Principal Place of Business  
**2617 CARDENA ST.  
 CORAL GABLES FL 33134**

Mailing Address  
**2617 CARDENA ST.  
 CORAL GABLES FL 33134**

2. Principal Place of Business

**625 Biltmore Way  
 Suite, Apt. #, etc.  
 Ste. 604**

City & State  
**Coral Gables, FL**

Zip  
**33134** Country  
**USA**

3. Mailing Address

**625 Biltmore Way  
 Suite, Apt. #, etc.  
 Ste. 604**

City & State  
**Coral Gables**

Zip  
**33134** Country  
**USA**



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0734450**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**RODRIGUEZ, TERESA M  
 2617 CARDENA ST.  
 CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
**625 Biltmore Way #604**  
 City **Coral Gables, FL** Zip Code **33134**

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

(NOTE: Registered Agent signature required when reinstating)

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PST  
 RODRIGUEZ, TERESA M  
 749 NAVARRE AVENUE  
 CORAL GABLES FL 33134** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**V  
 RODRIGUEZ, CIRILO R  
 6011 SW 88TH STREET  
 MIAMI FL 33156** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
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☐ 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

Date

Daytime Phone #

CR2E034 (5/00)

August 7, 00

To Whom It May Concern;

I am enclosing the mailing envelope with the incorrect address. He moved to 625 Biltmore Way and did not receive the report until recently.

I can be reached at (305) 448-7061.

Thank you!

Teresa Rodriguez