

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P97000053482**

1. Entity Name

MIREVI JEWELRY CORP.

Principal Place of Business

**6352 SW 8TH STREET
MIAMI FL 33155**

Mailing Address

**6352 SW 8TH STREET
MIAMI FL 33155**

2. Principal Place of Business

13616 SW 142ND AVE

3. Mailing Address

13616 SW 142ND AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33186

Country

DADE

Zip

33186

Country

DADE

4. FEI Number

13-2656313

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**VIERA, FRANCISCO JR
6352 SW 8TH STREET
MIAMI FL 33155**

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)

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

TITLE **P** ☐ Delete
NAME **VIERA, GUSTAVO**
STREET ADDRESS **8601 SW 185TH STREET**
CITY-ST-ZIP **MIAMI FL 33157**TITLE **S** ☐ Delete
NAME **VIERA, FRANCISCO SR.**
STREET ADDRESS **7385 SW 16 TERR.**
CITY-ST-ZIP **MIAMI FL 33155**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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: **x**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**FILED
Mar 16, 2001 8:00 am
Secretary of State**

03-16-2001 90005 026 ***150.00

00020720

DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

0234150

Attachment

#P97000053482

DO025725

To:

Whom it may concern

Please Note That OUR
F.E.I # 13-2656331
AND the STATE OF Florida
HAS FEI 13-2656313 ON
it's FORMS

Thank You.

Frank Vienna