

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90971 034 ***158.75

DOCUMENT # P97000068379

1. Entity Name

MIAMI INVESTMENT REALTY INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4461 PALM AVE.

3. Mailing Address
SAME

Suite, Apt. #, etc. E

Suite, Apt. #, etc.

City & State
HIALEAH FLORIDA

City & State

4. EEL Number
65-0774502

Applied For

Not Applicable

Zip
33012

Country
MIAMI-DADE

Zip

Country

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

DO NOT WRITE IN THIS SPACE

80057467

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
ROBERTO C. GONZALEZ

Street Address (P.O. Box Number is Not Acceptable)

8763 NW 142LN

33018

City MIAMI LAKES

FL

33018

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

Roberto C. Gonzalez

ROBERTO C. GONZALEZ OWNER (BROKER)

03/22/02

Signature, typed or printed name of registered agent and owner 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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

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
DP
GONZALEZ, ROBERTO C.
4461 PALM AVE. SUITE # E
HIALEAH FL. 33012

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address with all other like empowered.

SIGNATURE:

Roberto C. Gonzalez

ROBERTO C. GONZALEZ

3-22-02

(305) 828-6020

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)