

2000 UNIFORM BUSINESS REPORT (UBR)5/15
* 5/**FILED**
Jun 16, 2000 8:00 am
Secretary of State05-15-2000 90028 001 *****8.75
05-15-2000 90028 002 ***150.00**DOCUMENT # P97000072847**

1. Entity Name

MONTANA PIJOL MINING, CORP.

Principal Place of Business

Mailing Address

227 NW 33 ST.
MIAMI FL 331336860 SW 35 ST.
MIAMI FL 33155-3722

104034

2. Principal Place of Business

3. Mailing Address

227 NW 33 ST

6860 S.W. 35 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
MIAMI FLORIDACity & State
MIAMI FL 33155

4. FEI Number 65-0776598

Applied For

Not Applicable

Zip
33133Country
USAZip
33155Country
USA5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GONZALEZ, DIANA
6860 SW 35 ST.
MIAMI FL 33155Name
DIANA GONZALEZ

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

6860 SW 35 ST

City
MIAMI

FL

Zip Code
33155

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 fee applicable

(NOTE: Registered Agent signature required when renewing)

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. 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

OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME STREET ADDRESS CITY-ST-ZIP	TITLE	NAME STREET ADDRESS CITY-ST-ZIP
VP	RIVERA, MARIA LUISA E 227 NW 33 ST. MIAMI FL 33133	☐ Change ☐ Addition	
P	MUNOZ, REYNALDO A 6860 S.W. 35 ST. MIAMI FL 33155	☐ Change ☐ Addition	
ST	MEDINA, J. GENARO 2425 AVE 28 CALLE SAN PEDRO SULA, COL. LUCIANA HONDURAS	☐ Change ☐ Addition	
		☐ Change ☐ Addition	
		☐ Change ☐ Addition	
		☐ Change ☐ Addition	

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 #

CFR2034 (9/95)