FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 23, 2001 8:00 am Secretary of State DOCUMENT #-P97000076032 1. Entity Name C B GARCIA HOLDINGS, INC. 04-23-2001 90194 040 ***150.00 Principal Place of Business Mailing Address 160 MWL 127TH AVE. 160 NW 127TH AVE. MIAMI FL 38182 MIAMI FL 33182 21528 HalsTEAD Dr. Boca Rato N 3. Mailing Address 33 428 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For NOT APPLICABLE Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GARCIA, CONRADO 160 NW 127TH AVE. **MIAMI FL 33182** 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. agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12 TITLE · Delete NAME GARCIA, CONRADO NAME 1528 HaISTEAD DR OCA BATON FI 33428 STREET ADDRESS STREET ADDRESS 160 NW 127TH AVE. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33182 TITLE Delete TITLE 21518 HalsTEAD DA NAME GARCIA, ANGELA NAME STREET ADDRESS STREET ADDRESS BOCA RATON FI 160 N W 127TH AVENUE CITY-ST-ZIP CITY-ST-ZIP <u>MIAMI FL 33182</u> TITLE ☐ Delete NAME GARCIA, ANGEL M M.D. NAME STREET ADDRESS STREET ADDRESS 23399 SERENE MEADOW DRIVE CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** TITLE ☐ Delete TITLE Change ☐ Addition NAME GRIFFITH, SYLVIA G NAME STREET ADDRESS STREET ADDRESS 6535 F. PARKVIEW DRIVE CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33433** TITLE ☐ Delete Change TITLE ☐ Addition NAME GRIFFITH, NICHOLAS C NAME STREET ADDRESS STREET ADDRESS 6535 F. PARKVIEW DRIVE CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33433** TITLE ☐ Delete TITLE Change ☐ Addition NAME GARCIA. TIM E NAME STREET ADDRESS 7488 SILVERWOODS COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33433**

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:

Steam / we

4/16/01 (361) 482-2965