

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000092817

1. Entity Name

QUIMPEX ENGINEER CORP.

**FILED**  
**May 13, 2000 8:00 am**  
**Secretary of State**

05-13-2000 90005 002 \*\*\*150.00

Principal Place of Business

8249 NW 36TH ST., SUITE 103  
 MIAMI FL 33166

Mailing Address

8249 NW 36TH ST., SUITE 103  
 MIAMI FL 33166-6673

2. Principal Place of Business

16751 SW 36 Court

Suite, Apt. #, etc.

City & State

Miramar, FL

Zip 33027

Country USA

3. Mailing Address

16751 SW 36 Court

Suite, Apt. #, etc.

City & State

Miramar, FL

Zip 33027

Country USA

4. FEI Number

65-0795267

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

QUIJANO, EDGAR A A  
 11780 SW 18TH ST., APT. 522  
 MIAMI FL 33175

7. Name and Address of New Registered Agent

Name

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

16751 SW 36 CT

City

Miramar

FL

Zip Code 33027

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, 2000 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	<input type="checkbox"/> Delete
NAME	QUIJANO, EDGAR A	
STREET ADDRESS	11780 SW 18TH ST, APT 522	
CITY-ST-ZIP	MIAMI FL 33175	
TITLE	VP	<input type="checkbox"/> Delete
NAME	QUIJANO, SANDRA	
STREET ADDRESS	11780 SW 18TH ST, APT 522	
CITY-ST-ZIP	MIAMI FL 33175	
TITLE	VPT	<input checked="" type="checkbox"/> Delete
NAME	QUIROZ, JORGE	
STREET ADDRESS	7701 CAMINO REAL A-201	
CITY-ST-ZIP	MIAMI FL 33143	
TITLE	VPS	<input checked="" type="checkbox"/> Delete
NAME	RINCON, ROSALBA	
STREET ADDRESS	7701 CAMINO REAL A-201	
CITY-ST-ZIP	MIAMI FL 33143	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Quijano, Edgar A.	
STREET ADDRESS	16751 SW 36 CT	
CITY-ST-ZIP	Miramar, FL 33027	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Quijano, Sandra	
STREET ADDRESS	16751 SW 36 CT	
CITY-ST-ZIP	Miramar, FL 33027	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

*Edgar A. Quijano* Edgar A. Quijano

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/00

Date

(954) 447-7275

Daytime Phone #

CR2E034 (9/99)