## 2001 UNIFORM BUSINESS REPORT (UBR)

## Aug 16, 2001 8:00 am Secretary of State DOCUMENT # P97000096629 1. Entity Name STRAWBERRY, INC. 08-16-2001 90004 026 \*\*\*150.00 Principal Place of Business Mailing Address 610 SE 13 ST., STE, 205 610 SE 13 ST., STE, 205 DANIA FL 33004-4639 DANIA FL 33004-4639 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. \_\_ Suite, Apt. #, etc... =DO:NOT-WRITE-IN-THIS.SPACE ----City & State City & State 4. FEI Number Applied For 65-0794037 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SANCHEZ, OCTAVIO Street Address (P.O. Box Number is Not Acceptable) 610 SE 13TH STREET SUITE 205 /DANIA FL 33004 City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 ~10.⇒Election Campaign Financing \$5:00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITI F TITLE ☐ Delete ☐ Change Addition SANCHEZ, OCTAVIO NAME NAME STREET ADDRESS 610 SE 13 ST., STE. 204 STREET ADDRESS CITY-ST-ZIP DANIA FL 33004-4639 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DD F ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 frustee 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.

**FILED** 

Attachment DHPGNUUU 96625 AUG1525

From Strawberry inc. Octavio Sanchez: FOR some reason I never received the First notice, If there are any questions. you may contact me at; 610 S.E 1341 St. # 205 Dania, Fla. 33004 PH: (954) 923-5257 8/9/01 Clas Landy