

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2002 8:00 am
Secretary of State
 05-09-2002 90039 010 ***150.00

DOCUMENT # P97000099713

1. Entity Name
MAYOR TAX CORP.

Principal Place of Business

**3399 NW 72 AVE
 217
 MIAMI FL 33122
 US**

Mailing Address

**3399 NW 72 AVE
 217
 MIAMI FL 33122
 US**

2. Principal Place of Business

3399 NW 72 AVE

3. Mailing Address

3399 NW 72 AVE

Suite, Apt. #, etc.

SUITE 107

Suite, Apt. #, etc.

SUITE 107

City & State

MIAMI FL

City & State

MIAMI FL

Zip

33122

Country

US

Zip

33122

Country

US

4. FEI Number

65-0796875

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

RUMAYOR, JORGE L

**3399 NW 72ND AVE STE 217
 MIAMI FL 33010**

7. Name and Address of New Registered Agent

Name

JORGE L. RUMAYOR

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

3399 NW 72ND AVE SUITE 107

City

MIAMI

FL

Zip Code

33122

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

4/23/02

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, 2002 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 **DPST** ☐ Delete
 NAME **RUMAYOR, JORGE L**
 STREET ADDRESS **3399 NW 72 AVENUE SUITE 217**
 CITY-ST-ZIP **MIAMI FL 33122**

TITLE **VP** ☐ Delete
 NAME **RUMAYOR, SYLVIA I**
 STREET ADDRESS **3399 NW 72ND AVENUE SUITE 217**
 CITY-ST-ZIP **MIAMI FL 33122**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DPST** ☒ Change ☐ Addition
 NAME **JORGE L. RUMAYOR**
 STREET ADDRESS **3399 NW 72ND AVE SUITE 107**
 CITY-ST-ZIP **MIAMI FL 33122**

TITLE **VP** ☒ Change ☐ Addition
 NAME **SYLVIA I. RUMAYOR**
 STREET ADDRESS **3399 NW 72ND AVE SUITE 107**
 CITY-ST-ZIP **MIAMI FL 33122**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/02 (305) 436-098

Date

Daytime Phone #

CR2E037 (9/01)