2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2001 8:00 am
Secretary of State
02-27-2001 90054 001 ***150.00
02-27-2001 90054 002 *****8.75

DOCUMENT # P97000103611

1. Entity Name
PUENTE AND ASSOCIATES IN DESIGN, INC

Principal Place of Business	Mailing Address
244 VALENCIA AVE CORAL GABLES FLORIDA 33134	244 VALENCIA AVE CORAL GABLES FLORIDA 33134

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0799988 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
PUENTE, MARTHA E
244 VALENCIA AVE
CORAL GABLES FLORIDA
33134

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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 ____________________ DATE
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 Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	PUENTE, MARTHA E (PRESIDENT)		NAME		
STREET ADDRESS	244 VALENCIA AVE		STREET ADDRESS		
CITY-ST-ZIP	CORAL GABLES FL 33134		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		
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TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
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TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

CR2E034 (11/00)

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: Martha E Puente PRESIDENT 2-8-01 (305) 443 2227
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

1/30/01 CORPORATE DETAIL RECORD SCREEN 2:34 PM

NUM: P97000103611 ST:FL ACTIVE/FL PROFIT FLD: 12/08/1997

FEI#: 65-0799988

NAME : PUENTE AND ASSOCIATES IN DESIGN, INC.

PRINCIPAL: 244 VALENCIA AVE. CHANGED: 05/08/98

ADDRESS STE. C
CORAL GABLES, FL 33134 US

RA NAME : PUENTE, MARTHA E

RA ADDR : 244 VALENCIA AVE.
CORAL GABLES, FL 33134

ANN REP : (1998) BN 05/08/98 (1999) AN 03/29/99 (2000) A 05/16/00

DOC# P97000103611
6 2000

1. MENU, 3. OFFICERS, 7. LIST, 8. NEXT, 9. PREV

ENTER SELECTION AND CR: corinam hog's breath