

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 10, 2003 8:00 am
Secretary of State

01-10-2003 90104 038 ***150.00

DOCUMENT # *P98000018065*

1. Entity Name

Surtidora Automotriz Intl., Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3835 N.W. 32nd. Ave.

Suite, Apt. #, etc.

3. Mailing Address
P.O. BOX 350026

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami - Florida

City & State
MIAMI - FLORIDA

4. FEI Number 650818312

Applied For
Not Applicable

Zip
33142

Country
USA

Zip
33135

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name - *EDUARDO A. ALVAREZ*

Street Address (P.O. Box Number is Not Acceptable)
11584 S.W. 112th. Ave.

City *MIAMI* FL Zip Code *33176*

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
President	Eduardo A. Alvarez	11584 S.W. 112th. Ave. Miami, Florida	33176				
Vice-President	Sonia A. Alvarez	11584 S.W. 112th. Ave. Miami, Florida	33176				
Secretary	Jacqueline R. Alvarez	13620 S.W. 78th. Miami, Florida	33158				

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Eduardo A. Alvarez-Presid 1/7/2003

305-638-0821

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2ED034B (12/02)