

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000020828

1. Entity Name

MAX GALERY FINE ART, INC.

FILED
Aug 21, 2000 8:00 am
Secretary of State

08-21-2000 90215 026 ***550.00

Principal Place of Business

9357 FONTAINEBLEAU BLVD

D-104

MIAMI FL 33172

Mailing Address

9357 FONTAINEBLEAU BLVD

D-104

MIAMI FL 33172

2. Principal Place of Business

MAX GALERY ART INC

Suite, Apt. #, etc.

1051 Collins av #2

City & State

Miami Beach FL

Zip

33139

Country

U.S.A.

3. Mailing Address

1051 Collins av

Suite, Apt. #, etc.

#2 Miami Beach

City & State

FLORIDA

Zip

33139

Country

U.S.A.



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0820751

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GARCIA, MAXIMINO

9357 NW FOUNTAINEBLEAU BLVD.

MIAMI FL 33172

7. Name and Address of New Registered Agent

Name

Garcia Maximino

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

1051 Collins av #2

City

Miami Beach

FL

Zip Code

33139

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)

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FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 DP
NAME GARCIA, MAXIMINO
STREET ADDRESS 9357 NE FOUNTAINEBLEAU BLVD.
CITY-ST-ZIP MIAMI FL 33172

☐ Delete

TITLE Garcia Maximino
NAME 1051 Collins av #2
STREET ADDRESS 1051 Collins av #2
CITY-ST-ZIP Miami Beach FL 33139

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Garcia Maximino
NAME 1051 Collins av #2
STREET ADDRESS 1051 Collins av #2
CITY-ST-ZIP Miami Beach FL 33139

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)