

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **798000028399** ✓

1. Entry Name

Stitch by Stitch Embroidery

FILED

03 AUG 11 PM 3:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

400022613254

08/27/03--01056--017 \*\*150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

12964 SW. 133rd

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

Miami, Fla.

City &amp; State

4. FEI Number

58-2381169

Applied For

Not Applicable

Zip

33186

Country

USA

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name: **Deborah Ramirez**

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

12964 SW 133rd Ct

City: **Miami, FL**Zip Code: **33186**

8. The above named entry 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 resigning)

DATE

9. This corporation is eligible to satisfy its intangible tax (filing requirement and elect to do so. (See criteria on back)) ☐AMENDED UBR IS FOR THE  
Make Check Payable to Department of State10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE	<b>Michele Ramirez - Pres</b>
NAME	<b>12964 SW. 133rd</b>
STREET ADDRESS	<b>Miami FL 33186</b>
CITY - ST - ZIP	

TITLE	<b>Deborah Ramirez - VP</b>
NAME	<b>12964 SW. 133rd</b>
STREET ADDRESS	<b>Miami FL 33186</b>
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
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STREET ADDRESS	
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CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

SIGNATURE: **Deborah Ramirez**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DO NOT WRITE  
IN THIS SPACE

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g), 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 on an attachment with an address, with all other like empowerment.

430-02 305-234-234

Date

Deputy Phone #

CR20348 (12/01)

Payer

July 30, 2003

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Ref: P98000028399

Dear Sir or Madam,

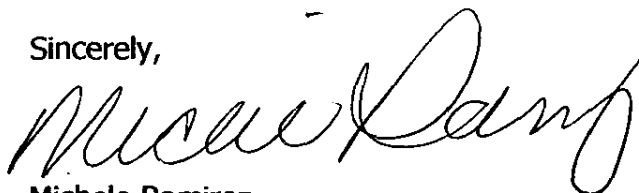
I recently attempted to file for a Fictitious Name. Upon my filing I was notified that my corporation had been Administratively Dissolved since October 2002.

I researched my records and found that we did indeed file our annual report with the appropriate \$150.00 filing fee. I can provide a cancelled check upon request. We received a letter dated June 3, 2002 from your office requesting further information. We were to enter the current registered agent and return the form to the Division of Corporations. We did return the form in a timely manner (see enclosed copy) and thought the matter was resolved. It seems as if your office never received the additional information that we sent out to them.

I was unaware of any problems until recently. I spoke with someone from your office who advised me to send a letter explaining the sequence of events, as well as an annual report for 2003 with the appropriate fee of \$150.00.

I can be contacted at (305) 246-8688 if any further information is needed.

Sincerely,



Michele Ramirez  
Stitch by Stitch Embroidery Inc.  
29790 Old Dixie Highway  
Homestead, FL 33033