

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 05, 2002 8:00 am**  
**Secretary of State**

02-05-2002 90045 043 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

<b>DOCUMENT # P98000033158</b> 1. Entity Name <b>BALMEN SERVICE STATION, INC.</b>																																											
Principal Place of Business <b>18590 COLLINS AVE.          N MIAMI BEACH FL 33181</b>		Mailing Address <b>18590 COLLINS AVE.          N MIAMI BEACH FL 33181</b>																																									
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																																									
City & State		City & State																																									
Zip	Country	Zip	Country																																								
6. Name and Address of Current Registered Agent <b>MENA, JUAN A JR          9725 N.W. 52ND ST.          UNIT 120          MIAMI FL 33178</b>		7. Name and Address of New Registered Agent Name <b>Juan A Mena Jr.</b> Street Address (P.O. Box Number is Not Acceptable) <b>9725 NW 52nd St UNIT 403</b> City <b>Miami</b> FL <b>33178</b>																																									
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: <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																											
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>		<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2002 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>																																									
10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b> <b>\$5.00 May Be Added to Fees</b>																																									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">11. OFFICERS AND DIRECTORS</th> <th colspan="2" style="text-align: left;">12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">NAME</td> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">NAME</td> </tr> <tr> <td>STREET ADDRESS</td> <td>STREET ADDRESS</td> <td>STREET ADDRESS</td> <td>STREET ADDRESS</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CITY-ST-ZIP</td> <td>CITY-ST-ZIP</td> <td>CITY-ST-ZIP</td> </tr> <tr> <td colspan="2" style="padding: 5px;">           PD  <b>MENA, JUAN A JR</b> <input type="checkbox"/> Delete  <b>9725 N.W. 52ND ST. UNIT 120</b> <b>403</b>  <b>MIAMI FL 33178</b> </td> <td colspan="2" style="padding: 5px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td colspan="2" style="padding: 5px;">           SD  <b>MENA, JUAN A</b> <input type="checkbox"/> Delete  <b>9725 N.W. 52ND ST. UNIT 120</b>  <b>MIAMI FL 33178</b> </td> <td colspan="2" style="padding: 5px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td colspan="2" style="padding: 5px;">           VTD  <b>BALMORI, JOSE R</b> <input type="checkbox"/> Delete  <b>18590 COLLINS AVE.</b>  <b>N MIAMI BEACH FL 33181</b> </td> <td colspan="2" style="padding: 5px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td colspan="2" style="padding: 5px;"> <input type="checkbox"/> Delete         </td> <td colspan="2" style="padding: 5px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td colspan="2" style="padding: 5px;"> <input type="checkbox"/> Delete         </td> <td colspan="2" style="padding: 5px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr> <td colspan="2" style="padding: 5px;"> <input type="checkbox"/> Delete         </td> <td colspan="2" style="padding: 5px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> </table>				11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		TITLE	NAME	TITLE	NAME	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP	PD <b>MENA, JUAN A JR</b> <input type="checkbox"/> Delete <b>9725 N.W. 52ND ST. UNIT 120</b> <b>403</b> <b>MIAMI FL 33178</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition		SD <b>MENA, JUAN A</b> <input type="checkbox"/> Delete <b>9725 N.W. 52ND ST. UNIT 120</b> <b>MIAMI FL 33178</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition		VTD <b>BALMORI, JOSE R</b> <input type="checkbox"/> Delete <b>18590 COLLINS AVE.</b> <b>N MIAMI BEACH FL 33181</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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.																																											
<b>SIGNATURE: </b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																											

01/19/02

Date

Daytime Phone #

CR2E034 (9/01)