

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000036549

1. Entity Name

AMERICAN EXPORT IMPORT & PURCHASING, INC.

FILED
May 05, 2000 8:00 am
Secretary of State

05-05-2000 90108 030 ***150.00

Principal Place of Business

Mailing Address

10715 S.W. 190 ST. - BAY 27
MIAMI FL 33157

10715 S.W. 190 ST. - BAY 27
MIAMI FL 33157-7630

2. Principal Place of Business

10715 SW 190 ST #27
Suite, Apt. #, etc.
27

3. Mailing Address

10715 SW 190 ST #27
Suite, Apt. #, etc.
27



DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-0830889

Applied For

Not Applicable

Zip

33157

Country

USA

Zip

33157

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FERIA, MAXIMILIANO
15451 S.W. 169 LANE
MIAMI FL 33187

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

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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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

TITLE DP ☐ Delete
NAME FERIA, MAXIMILIANO
STREET ADDRESS 15451 S W 169 LANE
CITY-ST-ZIP MIAMI FL 33187

TITLE DVPT ☐ Delete
NAME ORTEGA, UBALDINO I
STREET ADDRESS 10715 SW 190 STREET BAY 27
CITY-ST-ZIP MIAMI FL 33157

TITLE DS ☐ Delete
NAME FERIA, ALICIA M
STREET ADDRESS 15451 S.W. 169 LANE
CITY-ST-ZIP MIAMI FL 33187

TITLE ☐ Delete
NAME ~~ADRIAN~~
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP SAME

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP SAME

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP SAME

TITLE ☒ Change ☐ Addition
NAME AMERICAN EXPORT-IMPORT
STREET ADDRESS & PURCHASING INC.
CITY-ST-ZIP 10715 SW 190 ST. #27
MIAMI FL 33157

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)