

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000042855

1. Entity Name

VALUE UNDERWRITERS, INC.

Principal Place of Business

Mailing Address

3750 W FLAGLER ST
MIAMI FL 33134

3750 W FLAGLER ST
MIAMI FL 33134-1602

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0839814

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MILLER, TRAVIS L
106 E COLLEGE AVE, SUITE 1200
TALLAHASSEE FL 32301

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PDS ☐ Delete
NAME MARTINEZ, GISELA
STREET ADDRESS 9470 SW 25 DRIVE
CITY-ST-ZIP MIAMI FL 33165

TITLE VT ☐ Delete
NAME MENENDEZ, AVRORA
STREET ADDRESS 9470 SW 25 DRIVE
CITY-ST-ZIP MIAMI FL 33165

TITLE Pérez Barbara ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME 8844 SW 60ST
STREET ADDRESS VT Miami FL 33173
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME MENENDEZ, AVRORA
STREET ADDRESS 3750 W Flagler St
CITY-ST-ZIP Miami FL 33134

TITLE Pérez Barbara ☐ Change ☒ Addition
NAME
STREET ADDRESS 3750 W Flagler St
CITY-ST-ZIP Miami FL 33134

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

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

President

Date

3/22/00

Daytime Phone #

CR2FC034 (9/99)