

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000044849

1. Entity Name
MARGUZ SERVICES, INC.

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90404 008 ***150.00

Principal Place of Business

6355 SW 138TH PLACE
MIAMI FL 33183

Mailing Address

6355 SW 138TH PLACE
MIAMI FL 33183

2. Principal Place of Business

11216 SW 63 Terrace

Suite, Apt. #, etc.

3. Mailing Address

11216 SW 63 Terrace

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Miami FL

City & State

Miami FL

4. FEI Number

65-0836475

Applied For

Not Applicable

Zip

33173

Country

USA

Zip

33173

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~MARMOLEJOS, MARITZA D.C.~~
6355 SW 138 PLACE
MIAMI FL 33183

Maritza D.C. Guzman
11216 SW 63 terrace
Miami, FL 33173

7. Name and Address of New Registered Agent

Name

Maritza D.C. Guzman

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

11216 SW 63 terrace

City

Miami

FL

Zip Code

33173

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

Maritza D.C. Guzman

4-23-01

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, 2001 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	PTD	<input type="checkbox"/> Delete
NAME	MARMOLEJOS, MARITZA D.C.	
STREET ADDRESS	6355 SW 138 PLACE	
CITY-ST-ZIP	MIAMI FL 33183	
TITLE	PSD	<input type="checkbox"/> Delete
NAME	GUZMAN, MARINO ENRIQUE	
STREET ADDRESS	6355 SW 138 PLACE	
CITY-ST-ZIP	MIAMI FL 33183	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Maritza D.C. Guzman	
STREET ADDRESS	11216 SW 63 terrace	
CITY-ST-ZIP	Miami, FL 33173	
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Marino Enrique Guzman	
STREET ADDRESS	11216 SW 63 terrace	
CITY-ST-ZIP	Miami, FL 33173	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

Marino E. Guzman

Date

4-23-01

Daytime Phone #

(305) 271-7798

CR2E034 (10/00)