

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

02 MAR 19 PM 4:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P98000057556**

1. Entity Name

Pema Block, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5445 S.W. 5th St.

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

2001-2002 UBR

4. FEI Number
65-0846516

Applied For

Not Applicable

Zip

33134

Country

Dade

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Pedro Mayorga

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

5445 S.W. 5th Street

City

Miami

FL

Zip Code **33134**

DO NOT WRITE IN THIS SPACE

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 reappointing)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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
NAME
STREET ADDRESS
CITY-ST-ZIP
**Pedro Mayorga
5445 S.W. 5th Street
Miami, FL 33134
President**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**600005491316--9
-05/08/02--01021--032
****300.00 ****300.00**

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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)(f), 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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/02 305/446-3160

Date

Daytime Phone #

CR2E034B (12/01)

PEMA BLOCK, INC
5445 S.W. 5TH STREET
MIAMI, FLORIDA 33134
305/446-3160

FLORIDA DEPT. OF STATE
SECRETARY OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32314

REF: P98000057556
FEI # 65-0846516

TO WHOM IT MAY CONCERN:

Please be advised that our corporation moved last year. Unfortunately I was unaware that we had not received our renewal business report for year 2001 due to the change of address.

I am herewith enclosing \$ 300.00 as requested by your office for consideration. Our corporation is currently active and we would like to have all our records correctly.

Thank you for your consideration.

Best regards,


Pedro Mayorga