

FILED
May 19, 2003 8:00 am
Secretary of State

05-19-2003 90228 010 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000067600			
1. Entity Name HUMBERTO A. SALONIA, P.A.			
Principal Place of Business 12450 SW 106TH STREET SUITE 1 MIAMI, FL 33186 US		Mailing Address 12450 SW 106TH STREET SUITE 1 MIAMI, FL 33186 US	
2. Principal Place of Business 14747 SW 113 ST.		3. Mailing Address 14747 SW 113 ST.	
City & State Miami FL		City & State Miami FL	
Zip 33196		Zip 33196	
Country		Country	
4. FEI Number 52-2113719		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SALONIA, HUMBERTO A 13544 SW 110TH TERRACE MIAMI, FL 33186		7. Name and Address of New Registered Agent Name SALONIA Humberto A Street Address (P.O. Box Number is Not Acceptable) 14747 SW 113 ST. City Miami FL Zip Code 33196	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.		DATE 5/14/03	
FILE NOW WITH FEES \$150.00 After May 1, 2003 Fee will be \$250.00 Make Check Payable to Florida Department of State.		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SALONIA, HUMBERTO A 13544 SW 110TH TERR MIAMI, FL 33186	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SALONIA Humberto A. 14747 SW 113 ST. MIAMI FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 10 or Block 11 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 5/14/03 305 753 4091	

CR2E034 (10/02)

attachment

8/1/2019

#P98000067600

Division of Corporations
Annual Reports Filing

Dear Agent,


Regarding: Humberto A. Salonia, P.A.
Document # P98000067600
UBR 2003

Please except this late filing as I moved to a new home and the report was never forwarded. I completely forgot the UBR or its due date.

Please feel free to call should any questions arise concerning the above matter.

Thank you in advance in helping to bring my company in compliance.

Yours truly,



Humberto Salonia

New address: 14747 SW 113 Street
Miami, FL 33196
Tel.305.753.4095