

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 02, 1999 8:00 am
Secretary of State

06-02-1999 90003 025 *****5.00

06-02-1999 90003 026 ***150.00

DOCUMENT # P98000091337

1. Corporation Name

2001 PROFESSIONAL BUILDING, INC.

Principal Place of Business

2001 N.W. 7TH STREET
MIAMI FL 33135

Mailing Address

2001 N.W. 7TH STREET
MIAMI FL 33135

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/27/1998

4. FEI Number

#65-0871833

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☒

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 2001 n w 7 st

Suite, Apt. #, etc.

22 #203

City & State

23 Miami, Florida

Zip

24 33125

Country

25 U.S.

2a. Mailing Address

26 2001 n w 7 st

Suite, Apt. #, etc.

27 #203

City & State

28 Miami, Florida

Zip

29 33125

Country

30 U.S.

9. Name and Address of Current Registered Agent

ROPERO-CARTIER, ARMANDO
2001 N.W. 7TH STREET #200.
MIAMI FL 33135

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME ROPERO-CARTIER, ARMANDO

STREET ADDRESS 2001 N.W. 7TH STREET #200.

CITY-ST-ZIP MIAMI FL 33135

TITLE ☐ DELETE

NAME PINIELLA, ALFREDO

STREET ADDRESS 2001 N.W. 7TH STREET #203

CITY-ST-ZIP MIAMI FL 33135

TITLE ☐ DELETE

NAME MENDEZ, MARIA R

STREET ADDRESS 2220 S.W. 125TH COURT

CITY-ST-ZIP MIAMI FL 33175

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 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

Signature Phone #

4/20/99

(305) 642-1889

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