

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 30, 2001 08:00 AM**
Secretary of State**DOCUMENT # P98000093134**1. Entity Name
EDITORIAL LIBRUSA CORP.

Principal Place of Business

10201 HAMMOCK'S BLVD
SUITE 153-411
MIAMI
33196

FL

Mailing Address

10201 HAMMOCK'S BLVD
SUITE 153-411
MIAMI
33196

FL

2. Principal Place of Business
10201 HAMMOCK3. Mailing Address
10201 HAMMOCKSuite, Apt. #, etc.
SUITE 153-411Suite, Apt. #, etc.
SUITE 153-411

DO NOT WRITE IN THIS SPACE

City & State
MIAMI

FL

City & State
MIAMI

FL

4. FEI Number
65-0830115

Applied For

Not Applicable

Zip
33196

Country

Zip
33196

Country

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

CARVAJAL JOSE
10201 HAMMOCKS BLVD
STE 153-411
MIAMI
33196

FL

7. Name and Address of New Registered Agent

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 **JOSE CARVAJAL****04/30/2001**

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 S ☐ Delete
NAME CARVAJAL MARITZA
STREET ADDRESS 10201 HAMMOCKS BLVD, STE 153-411
CITY-ST-ZIP MIAMI FL 33196TITLE P ☐ Delete
NAME CARVAJAL JOSE
STREET ADDRESS 10201 HAMMOCKS BLVD, STE 153-411
CITY-ST-ZIP MIAMI FL 33196TITLE D ☐ Delete
NAME CARBAJAL JOSE
STREET ADDRESS 2050 WEST 56 STREET, STORE #8
CITY-ST-ZIP HIALEAH FL 33016TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE D ☒ Change ☐ Addition
NAME CARVAJAL JOSE
STREET ADDRESS 10201 HAMMOCKS BLVD #153-411
CITY-ST-ZIP MIAMI FL 33196TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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: **Jose Carvajal**

P

04/30/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)