

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000095410

1. Entity Name

COMPETITIVIDAD COMERCIAL, INC.

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90047 033 ***150.00

Principal Place of Business

10010 NORTHWEST 44 TERRACE
STE. 109
MIAMI FL 33178

Mailing Address

10010 NORTHWEST 44 TERRACE
STE. 109
MIAMI FL 33178

2. Principal Place of Business

10010 NW 44 Terrace

3. Mailing Address

10010 NW 44 Terrace

Suite, Apt. #, etc.

109

Suite, Apt. #, etc.

109

City & State

Miami

City & State

Miami Florida

Zip

33178

Country

Florida

Zip

33178

Country

Florida

4. FEI Number

65-0886110

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

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

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 PSTD ☐ Delete
NAME SUAREZ, MARIO E
STREET ADDRESS 10010 NORTHWEST 44 TERRACE, STE. 109
CITY-ST-ZIP MIAMI FL 33178

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE SECRETARY ☐ Change ☒ Addition
NAME SUAREZ LUCY
STREET ADDRESS 10010 NW 44 Terrace, Ste 109
CITY-ST-ZIP MIAMI, Florida

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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

MARIO SUAREZ

Date

Daytime Phone #

04/26/2001 305-591323

CR2E034 (10/00)