

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000099966

1. Entity Name

LCM HOLDINGS, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90463 014 ***150.00

Principal Place of Business

855 BURLINGTON ST.
OPA LOCKA FL 33054

Mailing Address

P.O. BOX 4457
HIALEAH FL 33014-0457

2. Principal Place of Business

6175 NW 167th St

3. Mailing Address

P.O. BOX 4457

Suite, Apt. #, etc.

G-16

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

HIALEAH, FL

4. FEI Number

65-0881313

Applied For

Not Applicable

Zip

33015

Country

USA

Zip

33014

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CARDOSO, MIGUEL O
855 BURLINGTON STREET
MIAMI FL 33054

7. Name and Address of New Registered Agent

Name

Miguel Cardoso

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

6175 NW 167 St G-16

City

MIAMI

FL

Zip Code

33015

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

Miguel Cardoso

(NOTE: Registered Agent signature required when reinstating)

4-24-2000

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, 2000 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 PD
NAME CARDOSO, MIGUEL O
STREET ADDRESS 8411 N.W. 74TH STREET
CITY-ST-ZIP MIAMI FL 33166 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME CARDOSO, MIGUEL
STREET ADDRESS 6175 NW 167th St G-16
CITY-ST-ZIP MIAMI, FL 33015 ☒ Change ☐ Addition

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

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

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

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

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

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

Miguel Cardoso

Date

4-24-2000

Daytime Phone #

305-823-3803

CR2E034 (9/99)