

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 30, 2001 8:00 am**  
**Secretary of State**  
 04-30-2001 90047 022 \*\*\*150.00

DOCUMENT # P98000107920

1. Entity Name

ARMILLARY GROUP, INC.

Principal Place of Business

750 S.E. 6 PL.  
 HIALEAH FL 33010

Mailing Address

750 S.E. 6 PL.  
 HIALEAH FL 33010

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0911779

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BALCEIRO, JACKELYN  
 9220 FOUNTAINBLEAU BLVD. #502  
 MIAMI FL 33174

Name

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

City

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

Jackelyn Balceiro-Secretary

04/08/01

Signature of the current 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
 NAME P  
 STREET ADDRESS BALCEIRO, ELRIQUE S  
 CITY-ST-ZIP 750 SE 6 PL  
 HIALEAH FL 33010

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

TITLE ☐ Delete  
 NAME S  
 STREET ADDRESS BLACEIRO, JACKELYN B  
 CITY-ST-ZIP 9220 FOUNTAINBLEAU BLVD 502  
 MIAMI FL 33174

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS 7425 SW 32 ST  
 CITY-ST-ZIP MIAMI, FL 33155

TITLE ☐ Delete  
 NAME T  
 STREET ADDRESS BALCEIRO, MADELYN  
 CITY-ST-ZIP 13029 SW 4 ST  
 MIAMI FL 33184

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS 7425 SW 32 ST  
 CITY-ST-ZIP MIAMI, FL 33155

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ 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

Jackelyn Balceiro-Secretary

04/08/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)