

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90208 013 ***150.00

DOCUMENT # P99000001447

1. Entity Name

BERRIZ & GIRALDO P.A.

Principal Place of Business

Mailing Address

**4080 SW 84TH AVENUE
 SUTIE C
 MIAMI FL 33155**

**4080 SW 84TH AVENUE
 SUTIE C
 MIAMI FL 33155-4263**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0884743

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

**BERRIZ, CLARA
 4080 SW 84TH AVENUE
 SUTIE C
 MIAMI FL 33155**

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

Paul Berriz

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

(NOTE: Registered Agent signature required when reinstating)

3-25-00

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete

**D
 BERRIZ, CLARA
 4080 SW 84TH AVENUE
 MIAMI FL 33155**

TITLE Change Addition

TITLE Delete

**VD
 BERRIZ, ANTONIO
 4080 SW 84TH AVENUE
 MIAMI FL 33155**

TITLE Change Addition

TITLE Delete

TITLE Delete

TITLE Change Addition

TITLE Delete

TITLE Delete

TITLE Change Addition

TITLE Delete

TITLE Delete

TITLE Change Addition

TITLE Delete

TITLE Delete

TITLE 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:

Paul Berriz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-25-00

Date

Daytime Phone #

CR2E034 (9/99)