2000 UNIFORM BUSINESS REPORT (UBR)

Apr 18, 2000 8:00 am Secretary of State DOCUMENT # **P99000003963** *GEORGE & PINO ELECTRONIC INC. 04-18-2000 90151 042 ***150.00 Principal Place of Business Mailing Address 3702 SW 89 COURT 3702 SW 89 COURT MIAMI FL 33165-4341 MIAMI FL 33165 Principal Place of Business 3. Mailing Address 89 court 89 court 3740 SW 740 SW Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State FZ FZ 0895509. MIAMI. MIAMI. Not Applicable Country U.S.A \$8.75 Additional 5. Certificate of Status Desired 3/65 73/65 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JORGE DE QUEZADA, JORGE Street-Address (P.O. Box Number is Not Acceptable) 3702 SW 89 COURT **MIAMI FL 33165** Zip Code City 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) 9. This corporation is eligible to satisfy its Intangible ** FILE NOW!!! FEE IS \$150.00 ---10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. ☐ Delete TITLE DE QUESADA, JOKEE DE QUESADA, JORGE NAME 3740 SW 89 court MIAMI FL 33/65 3702 SW 89 COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33165 VPD** ☐ Delete TITLE 🔀 Change ☐ Addition TITLE PINO, ANTONIO E NAME NAME AVE (APT 3A) STREET ADDRESS 6704 SW 50TH TERR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE MIAMI FL 33155 TITLE Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZÎP CITY-ST-ZIP

13. Phereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes, I further certify that the information indicated on this report or supplemental eport 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 director that the information indicated on this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

Delete

FILED

Change

☐ Addition