

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000011676

1. Entity Name

NARANJO Welding Shop Inc  
600 NW 7 Ave

Principal Place of Business

Mailing Address

600 NW 7 Ave  
Miami FL 33136

2135 NW 6 ST #8  
Miami FL 33125

2. Principal Place of Business

600 NW 7 Ave

3. Mailing Address

2135 NW 6 ST #8

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Miami FL

4. FEI Number

65-0892553

Applied For

Not Applicable

Zip

33125

Country

USA

Zip

33125

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NARANJO, Julio M  
600 NW 7 Ave #  
Miami FL 33126

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 \$35.00

APRIL MAY 2000 FEE \$155.00

Make Check payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

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\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P/T/D  
NAME NARANJO, Julio  
STREET ADDRESS 2135 NW 6 ST #8  
CITY- ST- ZIP Miami FL 33125

☐ Delete

TITLE S/D  
NAME NARANJO Julio M  
STREET ADDRESS 2135 NW 6 ST #8  
CITY- ST- ZIP Miami FL 33125

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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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

J NARANJO

Date

Daytime Phone #

4/11/00

305-324-0630

FILED  
Apr 20, 2000 8:00 am  
Secretary of State

04-20-2000 90092 026 \*\*\*150.00

B0068165

DO NOT WRITE IN THIS SPACE