

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2001 8:00 am
Secretary of State

03-14-2001 90489 034 ***150.00

0069226

DOCUMENT # P99000018644

1. Entity Name

NEW ART DECO CORPORATION

Principal Place of Business

250 LAYNE BLVD., SUITE 308
HALLANDALE FL 33009

Mailing Address

250 LAYNE BLVD., SUITE 308
HALLANDALE FL 33009

2. Principal Place of Business

501 Blue Heron Dr.

Suite, Apt. #, etc.

319A

City & State

Hallandale

Zip

Fl. 33009

Country

USA

3. Mailing Address

501 Blue Heron Dr.

Suite, Apt. #, etc.

319A

City & State

Hallandale

Zip

Fl. 33009

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0918630

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ALVAREZ, HERALDO
250 LAYNE BLVD., SUITE 308
HALLANDALE FL 33009

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 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

TITLE NAME ☐ Delete
PV ALVAREZ, HERALDO
STREET ADDRESS ~~250 LAYNE BLVD., SUITE 308~~
CITY-ST-ZIP ~~HALLANDALE FL 33009~~

TITLE NAME ☐ Delete
T ALVAREZ, AMALIA
STREET ADDRESS ~~250 LAYNE BLVD., SUITE 308~~
CITY-ST-ZIP ~~HALLANDALE FL 33009~~

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☒ Change ☐ Addition
STREET ADDRESS 501 Blue Heron Dr. #319A
CITY-ST-ZIP Hallandale - Fl. 33009

TITLE NAME ☒ Change ☐ Addition
STREET ADDRESS 501 Blue Heron Dr. #319A
CITY-ST-ZIP Hallandale - Fl. 33009

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

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

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

TITLE NAME ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Heraldo A. Alvarez

03-09-01 954-454-1986

Date Daytime Phone #

CR2E034 (10/00)