

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000019125

1. Entity Name
WFE ASSOCIATES, INC.

FILED
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90117 010 ***150.00

Principal Place of Business
10022 N.W. 52 TERRACE
MIAMI FL 33178

Mailing Address
10022 N.W. 52 TERRACE
MIAMI FL 33178

2. Principal Place of Business
8113 N.W. 161 TERRACE
Suite, Apt. #, etc.

3. Mailing Address
8113 N.W. 161 TERRACE
Suite, Apt. #, etc.

City & State
MIAMI LAKES FL
Zip
33016
Country
MIAMI - DADE

City & State
MIAMI LAKES FL
Zip
33016
Country
MIAMI - DADE

4. FEI Number 65-0924614
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

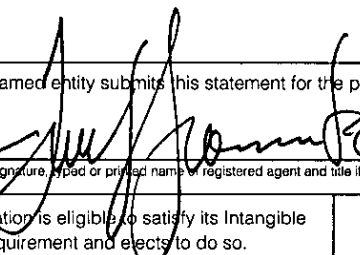
6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MONSERRATE, TIFFANY A
10022 N.W. 52 TERRACE
MIAMI FL 33178

Name
Street Address (P.O. Box Number is Not Acceptable)
8113 N.W. 161 TERRACE
City
MIAMI LAKES FL Zip Code
33016

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

4/13/01

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
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MONSERRATE, FRANK S
10022 N.W. 52 TERRACE
MIAMI FL 33178 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
8113 N.W. 161 TERRACE
MIAMI LAKES, FL 33016

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MONSERRATE, TIFFANY A
10022 N.W. 52 TERRACE
MIAMI FL 33178 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
8113 N.W. 161 TERRACE
MIAMI LAKES, FL 33016

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
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 of 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

Date

Daytime Phone #

4/13/01 305-819-7529

CR2E034 (10/00)