

2000 UNIFORM BUSINESS REPORT (UBR)

4/

FILED
May 30, 2000 8:00 am
Secretary of State

04-18-2000 90187 047 ***158.75

DOCUMENT # P99000035927

1. Entity Name

HIALEAH EN SUS MANOS, INC.

Principal Place of Business

Mailing Address

7860 N.W. 71ST STREET
 MIAMI FL 33166

7860 N.W. 71ST STREET
 MIAMI FL 33166-2342

2. Principal Place of Business

3. Mailing Address

1793 W 37 ST.
 Suite, Apt. #, etc.

1793 W 37 ST.
 Suite, Apt. #, etc.

City & State

HIALEAH, FL.

City & State

HIALEAH, FL.

Zip

33012

Country

MIAMI-DADE

Zip

33010

Country

MIAMI-DADE

4. FEI Number

65-1008114

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PINEIRO, MIGUEL
7860 N.W. 71ST STREET
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name: **PINEIRO MIGUEL, PRESIDENT**
 Street Address (P.O. Box Number is Not Acceptable):
1793 W 37 ST.
 City: **HIALEAH** FL Zip Code: **33012**

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

[Handwritten Signature]

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

(NOTE: Registered Agent signature required when reinstating)

4/11/2000
 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, 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

TITLE	PSTD	<input type="checkbox"/> Delete
NAME	PINEIRO, MIGUEL	
STREET ADDRESS	7860 N.W. 71ST STREET	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PINEIRO MIGUEL	
STREET ADDRESS	1793 W 37 ST	
CITY-ST-ZIP	HIALEAH, FL 33010	
TITLE	SECRETARY-TREASURER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PINEIRO GARDEN MARIA	
STREET ADDRESS	1793 W 37 ST.	
CITY-ST-ZIP	HIALEAH FL 33010	
TITLE	VICE-PRESIDENT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PINEIRO MIGUEL JR.	
STREET ADDRESS	1793 W. 37 ST.	
CITY-ST-ZIP	HIALEAH, FL 33010	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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:

[Handwritten Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/2000
 DATE

(305) 261-5757
 Daytime Phone #

CR2E034 (9/99)