

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000038082

1. Entity Name

EDAR CORPORATION

FILED

May 14, 2001 8:00 am
Secretary of State

05-14-2001 90022 050 ***150.00

Principal Place of Business

7051 SW 111 PLACE
MIAMI FL 33173

Mailing Address

7051 SW 111 PLACE
MIAMI FL 33173

2. Principal Place of Business

19975 NW 2nd ave

3. Mailing Address

19975 NW 2nd ave

Suite, Apt. #, etc.

6

Suite, Apt. #, etc.

6

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-0913966

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ESPINOSA, ARTURO
8625 NW 186 ST.
HIALEAH FL 33015

7. Name and Address of New Registered Agent

Name

ESPINOSA, ARTURO

Street Address (P.O. Box Number is Not Acceptable)

7051 SW 111 PLACE

City

MIAMI

FL

Zip Code

33173

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

Arturo Espinosa Jr

ARTURO ESPINOSA

4-24-01

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 ☐ Delete
NAME D
STREET ADDRESS ESPINOSA, ARTURO
CITY-ST-ZIP 7051 SW 111 PLACE
MIAMI FL 33173

TITLE ☐ Delete
NAME D
STREET ADDRESS ESPINOSA, EDGAR J
CITY-ST-ZIP 8625 NW 186 ST
HIALEAH FL 33015

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☒ Change ☐ Addition
NAME D
STREET ADDRESS ESPINOSA, EDGAR J
CITY-ST-ZIP 19975 NW 2nd ave #6
MIAMI, FL 33169

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

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

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

TITLE ☐ Change ☐ 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:

Arturo Espinosa Jr

ARTURO ESPINOSA

4-24-01

305-770-3381

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)