

2000 UNIFORM BUSINESS REPORT (UBR)

4/

FILED
May 17, 2000 8:00 am
Secretary of State

04-12-2000 90066 025 ***150.00

DOCUMENT # P99000038556

1. Entity Name

SANTA FE HOMES, INC.

Principal Place of Business

3675 SW 9TH TERRACE
 MIAMI FL 33135

Mailing Address

3675 SW 9TH TERRACE
 MIAMI FL 33135-4208

2. Principal Place of Business

Same as above

3. Mailing Address

3680 SW 9th

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

33135

Zip

Country

Zip

Country

Dade

4. FEI Number

65-0990079

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RODRIGUEZ, ALFREDO
 3675 SW 9TH TERRACE
 MIAMI FL 33135

7. Name and Address of New Registered Agent

Name

Same as above

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

Alfredo Rodriguez (President)

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

(NOTE: Registered Agent signature required when reinstating)

5-8-00

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: President
 NAME: Alfredo Rodriguez
 STREET ADDRESS: 3680 SW 9th
 CITY-ST-ZIP: MIAMI FL 33135

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TITLE:
 NAME:
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE:
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

☐ Change

☐ Addition

TITLE:
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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:

Alfredo Rodriguez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/5/00

Daytime Phone #

305-448-5105

CR2E034 (9/99)