

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000039014

1. Entity Name

ROSARIO SUAREZ DANCE ACADEMY, CORP.

FILED
Mar 03, 2000 8:00 am
Secretary of State

03-03-2000 90007 045 ***150.00

Principal Place of Business

Mailing Address

~~2101 S.W. 3RD AVENUE~~

~~2101 S.W. 3RD AVENUE~~

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~~MIAMI FL 33129~~

~~MIAMI FL 33129 1460~~

2. Principal Place of Business

5820 S.W. 8th St.

3. Mailing Address

5050 N.W. 7th. St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

PH-5

City & State

Miami, Fl. 33144

City & State

Miami, Fl. 33126

4. FEI Number

65-0915165

Applied For

Not Applicable

Zip

Country

33144

USA

Zip

Country

33126

USA

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

~~DEL ROSARIO, MARIA~~
~~2101 S.W. 3RD AVENUE~~
~~**~~
~~MIAMI FL 33129~~

Name

SUAREZ, Maria del Rosario

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

5050 N.W. 7th. St.

PH-5

City

Miami

FL

Zip Code

33126

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

Rosario Suarez

02.01.00

Signature, typed or printed name of registered agent and fee 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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME SUAREZ, MARIA D
STREET ADDRESS 2101 S.W. 3RD AVENUE
CITY-ST-ZIP MIAMI FL 33129

TITLE PD ☐ Change ☐ Addition
NAME SUAREZ, Maria del Rosario
STREET ADDRESS 5050 N.W. 7th. St. PH-5
CITY-ST-ZIP Miami, Fl. 33126

TITLE TD ☐ Delete
NAME ALVAREZ, JORGE L
STREET ADDRESS 2101 S.W. 3RD AVENUE
CITY-ST-ZIP MIAMI FL 33129

TITLE TD ☐ Change ☐ Addition
NAME ALVAREZ, Jorge L.
STREET ADDRESS 5050 N.W. 7th. St. PH-5
CITY-ST-ZIP Miami, Fl. 33126

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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. *MARIA D. SUAREZ*

SIGNATURE: *Rosario Suarez*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

02/01/00 (30) 267-5599

CR2E034 (9/99)