FILED 2000 UNIFORM BUSINESS REPORT (UBR) T# 799000 39235 (UB)
ZAMORA INVESTMENT CORPORATION May 02, 2001 8:00 am Secretary of State 1. Entity Name 7211 WEST 24 Avenue \$ 2329 05-02-2001 90171 024 ***150.00 7211 West 20 Adeque \$ 2329 Hialuh Fl. 33012 00046277 2. Principal Place of Business 3. Mailing Address Avenue 1211 West Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE House City & State City & State 4. FEI Number Applied For 650 928 720 33012 Not Applicable Zip Country \$8.75 Additional Dade 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **FRANCISCO** J. ZAMOUN Street Address (P.O. Box Number is Not Acceptable) 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible -10._Election Campaign Financing \$5:00-May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 11. Change ☐ Addition TITLE TITLE J. Zamor Francisco Apr 1 0-314 NAME NAME CR2E034 (56 ST 1675 WEST STREET ADDRESS STREET ADDRESS 33012 CITY-ST-ZIP CITY-ST-7IP Iti alekh YILO - President TITLE Change ☐ Addition TITLE CARLOS CHARZMA NAME 24 Ave \$ 2329 NAME STREET ADDRESS STREET ADDRESS 7211 WEST CITY-ST-ZIP 33016 CITY-ST-ZIP Lialich ☐ Change ☐ Addition Secretary ☐ Delete TITLE Flures NAME NAME ¥ 2329 24 Ave STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TICK SURV ☐ Delete Change Addition TITLE A. Zamoz DAZDILO NAME 24 Ave \$ 2329 NAME STREET ADDRESS 7211 W STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE NAME STREET ADDRESS 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 empowers to execute this report at 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 the empowered. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR