

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

03-29-2002 91431 040 ***150.00

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DOCUMENT # P99000039235

1. Entity Name

ZAMORA INVESTMENT CORPORATION

Principal Place of Business

**HIALEAH
 #2329
 HIALEAH FL 33012**

Mailing Address

**7211 WEST 24 AVE
 HIALEAH FL 33012**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Hialeah

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

7211 West 24 Ave.

Suite, Apt. #, etc.

City & State

Hialeah, FL 33012

Zip

Country

4. FEI Number

65-0928720

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**ZAMORA, FRANCISCO J
 1675 WEST 56 ST. APT. #D-314
 HIALEAH FL 33012**

7. Name and Address of New Registered Agent

Name

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

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, 2002 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	P	<input type="checkbox"/> Delete
NAME	ZAMORA, FRANCISCO J	
STREET ADDRESS	1675 WEST 56 ST. APT. #D-314	
CITY-ST-ZIP	HIALEAH FL 33012	
TITLE	VP	<input type="checkbox"/> Delete
NAME	CUAREZMA, CARLOS	
STREET ADDRESS	7211 WEST 24 AVE. #2329	
CITY-ST-ZIP	HIALEAH FL 33016	
TITLE	T	<input type="checkbox"/> Delete
NAME	ZAMORA, DANILO A	
STREET ADDRESS	7211 W 24 AVE #2329	
CITY-ST-ZIP	HIALEAH FL 33016	
TITLE	S	<input type="checkbox"/> Delete
NAME	FLETES, OSCAR R	
STREET ADDRESS	7211 W 24 AVE #2329	
CITY-ST-ZIP	HIALEAH FL 33016	
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		<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		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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)(l), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

Date

Daytime Phone #

CR2E034 (9/01)