## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 14, 2000 8:00 am Secretary of State DOCUMENT # P99000040622 1. Entity Name EL SEVILLANO IRON WORKS. INC. 04-14-2000 90088 034 \*\*\*150.00 Mailing Address Principal Place of Business 345 WEST 21ST STREET 345 WEST 21ST STREET HIALEAH FL 33010 HIALEAH FL 33010-2518 3919T1 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number 65-0917349 City & State Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent. 6. Name and Address of Current Registered Agent. Name GONZALEZ, HUMBERTO Street Address (P.O. Box Number is Not Acceptable) 345 WEST 21ST STREET HIALEAH FL 33010 Zip Code City FL bs this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above name 02-02-00 SIGNATURE red Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 ~ 9. This corporation is eligible to satisfy its Intangible 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. PD TITLE Change Addition TITLE □ Delete NAME GONZALEZ, HUMBERTO NAME STREET ADDRESS STREET ADDRESS 345 WEST 21ST STREET CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33010 ☐ Change ☐ Addition ☐ Delete TITLE TITLE AZCUY, RODOLFO NAME NAME STREET ADDRESS STREET ADDRESS 345 WEST 21ST STREET CITY-ST-7IP CITY-ST-ZIP HIALEAH FL 33010 Change Addition -Delete TITLE. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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 receive for trustee Ampowered 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:

02-02-00 (305)38