

Amended

02/13/2002 17:38 3058570204

FILED
FRIEDRICH HOFFMEISTER SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT 22 PM 4:00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # **P9900004458 AMENDED**

1. Entity Name

BODEGA NAVARRA, Inc.**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

2769 SW 27 Ave

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

FL

City & State

4. FCI Number

65-0921078

Applied For

Not Applicable

33133

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

MICHAEL PEREZ

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

9745 SUNSET DR. #105

City

FL**33173****DO NOT WRITE
IN THIS SPACE**

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

Michael Perez

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

(If filer, registered agent signature required when registering)

DATE

9. This corporation is eligible to elect its intangible

Tax filing requirement and elects to do so
(See criteria on back) ☐

January 1 - May 1 Fee is \$400.00

After May 1, Fee is \$600.00

Returns Due 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 **MARK HOFFMEISTER**
STREET ADDRESS **2769 SW 27 Ave**
CITY-STATE-ZIP **MIAMI FL 33133**TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP **800005183068-7**
=04702702=01043=017
*******76.25 *****76.25**TITLE
NAME
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CITY-STATE-ZIP**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Mark Hoffmeister**2-14-02**

SIGNATURE AND TYPE OF PRINTED NAME OF OFFICER OR DIRECTOR

Date

Filing Office

3/25/02

CORPORATE DETAIL RECORD SCREEN

9:51 AM

NUM: P990000044158 ST:FL INACTIVE/FL PROFIT FLD: 05/12/1999

LAST: VOLUNTARY DISSOLUTION FLD: 03/11/2002

FEI#: 65-0921078

NAME : BODEGA NAVARRA, INC.

PRINCIPAL: 141 GIRALDA

ADDRESS CORAL GABLES, FL 33134

RA NAME : PEREZ, MICHAEL

RA ADDR : 13876 SW 56TH ST.

#333

MIAMI, FL 33175 US

ANN REP : (2000) A 05/22/00 (2001) A 05/14/01

3/25/02

DEPOSITS/PAYMENTS DETAIL SCREEN

9:51 AM

DEPOSIT NUMBER : 11/06/01 01084 013

DEPOSIT TYPE : COR

ACCOUNT NUMBER :

DEPOSIT AMOUNT : 61.25

USER ID : RWILLIAMS

DEPOSIT BALANCE: 0.00

DEBIT MEMO DATE:

VOID DATE :

TRACKING NUMBER: 900004669739

DOCUMENT NUMBER: P990000044158

REQUESTOR : DM#22316-C C-2 11/27/01

LEDGER DATE : 11/29/01

SUB ACCT NUMBER:

CATEGORY

DESCRIPTION

AMOUNT

AR

ANNUAL REPORT

51.25

ARARTS

ANNUAL REPORTS - ARTS

10.00

+ NEXT, - PREV, 1. MENU, 2. FILING, 3. OFFICERS, 4. EVENTS

ENTER SELECTION AND CR:

Replacement
fee -