

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000047405 ✓

1. Entity Name

Verimelsa Import & Export Corporation ✓
DBA - Millennium Glass

Principal Place of Business

7319 NW 46 St
Miami, FL 33166

Mailing Address

7319 NW 46 St
Miami, FL 33166

2. Principal Place of Business

7319 NW 46 St

Suite, Apt. #, etc.

Miami, FL

City & State

33166

USA

Zip

Country

3. Mailing Address

7319 NW 46 St

Suite, Apt. #, etc.

Miami, FL

City & State

33166

USA

Zip

Country

4. FEI Number

65-0921575

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Maite Hoyos, P.A.

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

1101 Brickell Ave Suite 704

City

Miami

FL

Zip Code

33131

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, 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 President ☒ Delete
NAME Maria Elena Torres
STREET ADDRESS 1550 Brickell Ave Apt 214B
CITY-ST-ZIP Miami, FL 33129

TITLE President ☒ Change ☒ Addition
NAME Patricio G. Salgado
STREET ADDRESS 19025 SW 186 Ter
CITY-ST-ZIP Miami, FL 33157

TITLE Vice President ☒ Delete
NAME Fernando Galarraga
STREET ADDRESS 1550 Brickell Ave Apt 214B
CITY-ST-ZIP Miami, FL 33129

TITLE Vice-President ☒ Change ☒ Addition
NAME Maria Elena Torres
STREET ADDRESS 5670 NW 116 Ave #223
CITY-ST-ZIP Miami, FL 33178

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Secretary ☒ Change ☐ Addition
NAME Fernando Galarraga
STREET ADDRESS 5670 NW 116 Ave #223
CITY-ST-ZIP Miami, FL 33178

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
NAME
STREET ADDRESS
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/00

Date

305-593-0890

Daytime Phone #

CR2E034 (9/99)