## **2001 UNIFORM BUSINESS REPORT (UBR)** FILED Feb 19, 2001 8:00 am DOCUMENT # P99000049110 Secretary of State 1. Entity Name PIACERE ENTERPRISES CORP. 02-19-2001 90275 011 \*\*\*150.00 Mailing Address Principal Place of Business ROMINA PAULA KOTLIAR ROMINA PAULA KOTLIAR 21205 YACHT CLUB DRIVE APT. 3009 21205 YACHT CLUB DRIVE APT. 3009 A TO D A A AVENTURA FL 33180 AVENTURA FL 33180 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0928988 Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SAENZ, RAUL Street Address (P.O. Box Number is Not Acceptable) 8180 N.W. 36 STREET, #100 MIAMI FL 33166 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 (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, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change Addition ☐ Delete TITLE TITLE NAME KOTLIAR, MAURICIO NAME STREET ADDRESS STREET ADDRESS 21205 YACHT CLUB DR UNIT 3009 CITY-ST-ZIP CITY-ST-ZIP AVETURA FL 33180 ☐ Change Addition ☐ Delete TITLE TITLE. NAME KOTLIAR, ROMINA STREET ADDRESS STREET ADDRESS 21205 YACHT CLUB DR UNIT 3009 CITY-ST-ZIP\_ CITY-ST-ZIP AVETURA FL 33180 --- - --- -[7] Change [X] Addition ☐ Delete TITLE JORGE TOBAL JORGE TOBAL NAME STREET ADDRESS 21205 YACHT CLUB DR UNIT 3009 21205 YACHT CLUB DR UNIT 3009 STREET ADDRESS CITY-ST-ZIP <u> AVENTURA . FL 33180</u> CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TIT! F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Change Addition ☐ Delete TITLE TITLE

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 jeport 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/12/01

Daytime Phone #