

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2001 8:00 am
Secretary of State

05-23-2001 90232 009 ***158.75

DOCUMENT # P99000057350

1. Entity Name

NATIONS CAPITAL CREDIT, CORP.

Principal Place of Business

14750 N.W. 77TH COURT
 SUITE 335
 MIAMI LAKES FL 33016

Mailing Address

14750 N.W. 77TH COURT
 SUITE 335
 MIAMI LAKES FL 33016

660242



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **65-0931594**

Applied For
 Not Applicable

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

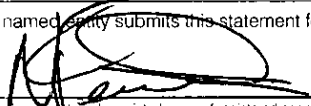
6. Name and Address of Current Registered Agent

GONZALEZ, MIRIAM
14750 N.W. 77TH COURT
SUITE 335
MIAMI LAKES FL 33016

7. Name and Address of New Registered Agent

Name **NORBERTO FERNANDEZ**
 Street Address (P.O. Box Number is Not Acceptable)
14750 N.W. 77th Suite 335
 City **MIAMI, LAKE** **FL** Zip Code **33016**

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  **Norberto Fernandez** **1-25-01**
Signature typed or printed name of registered agent and title if applicable. (NOT: 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!
After MAY 1, 2001 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	D	<input checked="" type="checkbox"/> Delete
NAME	GONZALEZ, MIRIAM	
STREET ADDRESS	14750 N.W. 77TH COURT	
CITY - ST - ZIP	MIAMI LAKES FL 33016	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	FERNANDEZ, NORBERTO	
STREET ADDRESS	85 EAST 44TH ST.	
CITY - ST - ZIP	MIAMI LAKES FL 33016	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
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	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NORBERTO FERNANDEZ	
STREET ADDRESS	14750 N.W. 77th Suite 335	
CITY - ST - ZIP	MIAMI, LAKE, FL 33016	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MIRIAM GONZALEZ	
STREET ADDRESS	14750 N.W. 77th Suite 335	
CITY - ST - ZIP	MIAMI, LAKE, FL 33016	
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
NAME		
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)(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:  **NORBERTO FERNANDEZ** **1-25-01** **305-364-9008**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)