

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2002 8:00 am
Secretary of State

03-19-2002 90008 032 ***150.00

0213668
 AV

DOCUMENT # P99000057877

1. Entity Name
 "BOSCH ELECTRIC CORP."

Principal Place of Business
 141 S.W. 54TH AVENUE
 MIAMI FL 33134

Mailing Address
 141 S.W. 54TH AVENUE
 MIAMI FL 33134



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

433 NW 25 Ave apt 1

3. Mailing Address

433 NW 25 Ave

Suite, Apt. #, etc.

apt 1

Suite, Apt. #, etc.

apt 1

City & State

Miami FL

City & State

Miami FL

Zip

FL

Country

Miami

Zip

33125

Country

Miami

4. FEI Number

65-0936487

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BOSCH, IBRAHIM
 141 S.W. 54TH AVENUE
 MIAMI FL 33134

7. Name and Address of New Registered Agent

Name

Bosch Ibrahim

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

433 NW 25 Ave apt 1

City

Miami

FL

Zip Code

33125

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/10/02

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, 2002 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 PSTD
 NAME BOSCH, IBRAHIM
 STREET ADDRESS 141 S.W. 54TH AVENUE
 CITY-ST-ZIP MIAMI FL 33134 ☐ Delete

TITLE VD
 NAME ECHEVERRI A., MARIA T
 STREET ADDRESS 141 S.W. 54TH AVENUE
 CITY-ST-ZIP MIAMI FL 33134 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD
 NAME Ibrahim Bosch ☒ Change ☐ Addition
 STREET ADDRESS 433 NW 25 Ave apt 1
 CITY-ST-ZIP MIAMI, FL 33125

TITLE VD
 NAME Ibrahim Bosch Sr. ☒ Change ☒ Addition
 STREET ADDRESS 433 NW 25 Ave apt 1
 CITY-ST-ZIP MIAMI, FL 33125

TITLE SD
 NAME Rosano Bosch ☐ Change ☒ Addition
 STREET ADDRESS 433 NW 25 Ave apt 1
 CITY-ST-ZIP MIAMI, FL 33125

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

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]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/10/02 (305) 219 8251

CR2E034 (9/01)