## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Aug 22, 2000 8:00 am Secretary of State DOCUMENT # **P99000060384** EXCLUSIVAS LOURDES SANCHEZ, INC. 08-22-2000 90236 027 \*\*\*150.00 Principal Place of Business Mailing Address 65-NW:27TH-COURT--- == 65 NW-27TH-COURT---- = = **MIAMI FL 33125 MIAMI FL 33125** A0074014 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State Not Applicable Zip Country Country \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ALBO, JAMES V Street Address (P.O. Box Number is Not Acceptable) 2020 NE 163RD #300 **NORTH MIAMI BEACH FL 33162** Zip Code FL 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 \*\*FILE.NOW!!! FEE IS-\$550,00 This corporation is eligible to satisfy its Intangible 10 Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750:00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. **√** Delete TITLE NAME GARCIA, MIRIAM M S STREET ADDRESS 65 NW 27TH COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33125** ☐ Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP \_ Addition TITLE Delete ---NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

I hereby certify that the information supplied with this filling 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.

GNATURE:

SIGNATURE REQUIRED

ANCHEZ GARCIA

(305)643-0467

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P9900060384 EXCLUSIVAS LOURDES SANCHEZ, INC. Principal Place of Business Mailing Address 65 NW 27TH COURT 65 NW 27TH COURT MIAMI FL 33125 MIAMI\_FL-33125 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State Not Applicable Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ALBO, JAMES V Street Address (P.O. Box Number is Not Acceptable) -2020 NE 163RD #300 NORTH MIAMI BEACH FL 33162 Zip Code City F۱ 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Make Check Payable to Department of State Tax filing requirement and elects to do so Added to Fees Trust Fund Contribution. (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ■ Addition **√** Delete TITLE TITLE GARCIA, MIRIAM M S NAME STREET ADDRESS STREET ADDRESS 65 NW 27TH COURT 3312 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33125** ☐ Addition Change TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADORESS 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 of the corporation or the receiver or dustee empowered changed, or on an attachment with an address with all other like empowered.

MIRIAM MARSARITA

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JAMES V. ALBO
Attorney-At-Law

Attorney At Luw
Twenty Twenty Professional Center - Suite 300
2020 N.E. 1634 Street
North Miami Beach, Florida 33162
Dade(305)944-9100(305)798-6600Broward(954)525-5333
Fax (305) 949-9029 E-Mail James Albo@aol.com

August 11, 2000

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Florida 32302-1500

Re: Exclusivas Lourdes Sanchez, Inc. P990000384

Dear Sir or Madame:

Per this office's telephone conversation with your office on August 10, 2000 enclosed, please find the executed 2000 Uniform Business Report for the above-captioned corporation and a check in the amount of \$150.00, with a self-addressed, stamped envelope.

Furthermore, per this office's telephone conversation, Ms. Sanchez, director of said corporation, was out of the country and her mail was not forwarded to her as she had directed. Therefore, she did not receive the original report in a timely manner.

Please accept the corporation's report, original filing fee and return a stamped copy of said report to this office in the enclosed self-addressed stamped envelope.

Thank you for your consideration and cooperation in this matter.

Sincerely,

JAMES V. ALBO, ESQ.

JYA/li: enclosures

pc: Exclusivas Lourdes Sanchez, Inc.