

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000062835

1. Entity Name

21ST CENTURY PRINTING CORP.

FILED
Feb 10, 2000 8:00 am
Secretary of State

02-10-2000 90042 023 ***150.00

Principal Place of Business

Mailing Address

782 NORTHWEST LEJEUNE ROAD
SUITE 637
MIAMI FL 33126

782 NORTHWEST LEJEUNE ROAD
SUITE 637
MIAMI FL 33126

2. Principal Place of Business

7311 N.W. 79 TERR

3. Mailing Address

7311 N.W. 79 TERR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MEDLEY, FL

City & State

MEDLEY, FL.

4. FEI Number

65-0933859

Applied For

Not Applicable

Zip

33166

Country

USA

Zip

33166

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

GUILLERMO TORRES

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

7311 N.W. 79 TERRACE

City

MEDLEY

FL

Zip Code

33166

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

TITLE PD ☐ Delete
NAME REYES, HUGO
STREET ADDRESS 782 NORTHWEST LEJEUNE ROAD, SUITE 637
CITY-ST-ZIP MIAMI FL 33126

TITLE VD ☐ Delete
NAME MORINO, JORGE A
STREET ADDRESS 782 NORTHWEST LEJEUNE ROAD, SUITE 637
CITY-ST-ZIP MIAMI FL 33126

TITLE SD ☐ Delete
NAME MORINO, FERNANDO G
STREET ADDRESS 782 NORTHWEST LEJEUNE ROAD, SUITE 637
CITY-ST-ZIP MIAMI FL 33126

TITLE TD ☐ Delete
NAME GARCIA, ALBERTO J
STREET ADDRESS 782 NORTHWEST LEJEUNE ROAD, SUITE 637
CITY-ST-ZIP MIAMI FL 33126

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME REYES, HUGO
STREET ADDRESS 7311 N.W. 79 TERRACE
CITY-ST-ZIP MEDLEY, FL. 33166

TITLE VD ☒ Change ☐ Addition
NAME MORINO, JORGE A.
STREET ADDRESS 7311 N.W. 79 TERRACE
CITY-ST-ZIP MEDLEY, FL. 33166

TITLE SD ☒ Change ☐ Addition
NAME MORINO, FERNANDO G.
STREET ADDRESS 7311 N.W. 79 TERRACE
CITY-ST-ZIP MEDLEY, FL. 33166

TITLE TD ☒ Change ☐ Addition
NAME GARCIA, ALBERTO J.
STREET ADDRESS 7311 N.W. 79 TERRACE
CITY-ST-ZIP MEDLEY, FL. 33166

TITLE D ☐ Change ☒ Addition
NAME TORRES, GUILLERMO
STREET ADDRESS 7311 N.W. 79 TERRACE
CITY-ST-ZIP MEDLEY, FL. 33166

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

2/4/00

Date

(305) 884-1419

Daytime Phone #

CR2E034 (9/99)