

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 13, 2000 8:00 am
Secretary of State

07-13-2000 90020 031 ***150.00

DOCUMENT # 099000064645

1. Entity Name ENCARNACION and de VALDEZ INC.

Principal Place of Business: 1001 NE 125 ST N. MIAMI, FL 33161

Mailing Address: _____

UUUUJ771

2. Principal Place of Business: _____

3. Mailing Address: 1310 NE 200 Terrace

Suite, Apt. #, etc.: _____

City & State: miami FL

Zip: 33179 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0938596

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

6. Name and Address of Current Registered Agent: MARIA E de VALDEZ, 1001 NE 125 ST, N. MIAMI FL 33161

7. Name and Address of New Registered Agent: MARIA E de VALDEZ, 1001 NE 125 ST N. MIAMI, FL, Zip Code 33161

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: Maria de Valdez (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. **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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: <u>PD/ MARIE Jose</u> <input checked="" type="checkbox"/> Delete	TITLE: <u>PD/ MARIA E. de VALDEZ</u> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME: <u>Michel</u>	NAME: <u>MARIA E. de VALDEZ</u>
STREET ADDRESS: <u>1005 NE 125 ST</u>	STREET ADDRESS: <u>1001 NE 125 ST</u>	CITY-ST-ZIP: <u>N MIAMI FL 33161</u>	CITY-ST-ZIP: <u>N MIAMI FL 33161</u>
<input type="checkbox"/> Delete	TITLE: <u>VP/ MARIA ENCARNACION</u> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME: _____	NAME: <u>MARIA ENCARNACION</u>
<input type="checkbox"/> Delete	STREET ADDRESS: <u>1001 NE 125 ST</u>	STREET ADDRESS: _____	STREET ADDRESS: <u>N MIAMI FL 33161</u>
<input type="checkbox"/> Delete	CITY-ST-ZIP: _____	CITY-ST-ZIP: _____	CITY-ST-ZIP: _____
<input type="checkbox"/> Delete	TITLE: _____	TITLE: _____	TITLE: _____
<input type="checkbox"/> Delete	NAME: _____	NAME: _____	NAME: _____
<input type="checkbox"/> Delete	STREET ADDRESS: _____	STREET ADDRESS: _____	STREET ADDRESS: _____
<input type="checkbox"/> Delete	CITY-ST-ZIP: _____	CITY-ST-ZIP: _____	CITY-ST-ZIP: _____
<input type="checkbox"/> Delete	TITLE: _____	TITLE: _____	TITLE: _____
<input type="checkbox"/> Delete	NAME: _____	NAME: _____	NAME: _____
<input type="checkbox"/> Delete	STREET ADDRESS: _____	STREET ADDRESS: _____	STREET ADDRESS: _____
<input type="checkbox"/> Delete	CITY-ST-ZIP: _____	CITY-ST-ZIP: _____	CITY-ST-ZIP: _____

CR2E034 (9/99)

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: MARIA E. de Valdez Maria de Valdez Date: 5/30/00 Daytime Phone #: 30565132

Attachment
D# 9900006RHS
0006971

5-30-00

To whom it may concern

This note is to inform the Division of Corpora-
tion that as of as today we haven't receive
the annual report form.

Thank you for sending us an other one.
blanardevader