

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2003 8:00 am
Secretary of State

02-20-2003 90131 004 ***158.75

DOCUMENT # P99000065830

1. Entity Name
HIDDEN OAKS HOMES, INC.



Principal Place of Business
15165 N.W. 77 AVE
2002
MIAMI FL 33014

Mailing Address
15165 N.W. 77 AVE
2002
MIAMI FL 33014



2. Principal Place of Business
14400 NW 77 Ct.

Suite, Apt. #, etc.
300

City & State
MIAMI LAKES

Zip
FL

Country
USA

3. Mailing Address
14400 NW 77 Court

Suite, Apt. #, etc.
300

City & State
MIAMI LAKES FL

Zip
33016

Country
USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0937627**

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HERRERA, CARLOS JR
15165 NW 77 AVENUE STE 2002
MIAMI FL 33014

7. Name and Address of New Registered Agent

Name **Carlos Herrera Jr**
Street Address (P.O. Box Number is Not Acceptable)
14400 NW 77 Court
300
City **MIAMI LAKES** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

(NOTE: Registered Agent signature required when reinstating)

2-17-03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **HERRERA, CARLOS JR**
STREET ADDRESS **15165 NW 77 AVE STE 2002**
CITY-ST-ZIP **MIAMI FL 33014**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Carlos Herrera Jr** ☒ Change ☐ Addition
NAME
STREET ADDRESS **14400 NW 77 COURT # 300**
CITY-ST-ZIP **MIAMI LAKES FL 33016**

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

2-17-03 305-823-8099

Date

Daytime Phone #

CR2E034 (10/02)