

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 OCT -7 AM 10:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-10/10/02--01089--008
*****140.00 *****70.00

DOCUMENT # P99000066567

1. Entity Name

Robaina Furniture, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2667 West 76 Street

Suite, Apt. #, etc.

3. Mailing Address

2667 West 76 Street

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Hialeah, Florida

Zip

33016

Country

USA

City & State

Hialeah, Florida

Zip

33016

Country

USA

4. FEI Number

65-0938432

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Jorge Alberto Otero

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

2667 West 76 Street

City

Hialeah

FL

Zip Code

33016

**DO NOT WRITE
IN THIS SPACE**

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

Jorge Alberto Otero

10/3/02

Signature typed or printed name of registered agent and fee if applicable.

(Affix: Registered agent signature required when reappointing)

DATE

9. This corporation is eligible to satisfy its intangible
tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$01.25

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	P/S/D
NAME	Jorge Alberto Otero
STREET ADDRESS	2667 W. 76 St., Hialeah, Fl. 33016
CITY- ST- ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(b), 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 on an attachment with an address, with all other like encumbrances.

SIGNATURE:

Jorge Alberto Otero

Jorge Alberto Otero, Pres. 10/3/02 305-828-4780

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Original Filing #

CR200345 (12/01)

10/18/02

Requester's Name
Address
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

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****140.00 *****35.00

Examiner's Initials

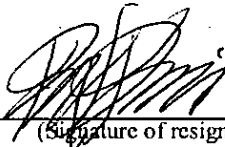
OFFICER / DIRECTOR RESIGNATION

I, Roberto Robaina, hereby resign as President/Secretary
(Title)

of Robaina Furniture, Inc.,
(Name of Corporation)

a corporation organized under the laws of the State of Florida

and affirm that the corporation has been notified in writing of the resignation.



(Signature of resigning officer/director)

FILING FEE IS \$35.00

**Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**

Requester's Name	
Address	
City/State/Zip	Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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(Corporation Name) (Document #)
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(Corporation Name) (Document #)
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REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

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 -10/10/02--01089--008
 FOR DEPOSIT ONLY
 DEPT OF STATE 4500453

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Examiner's Initials

OFFICER / DIRECTOR RESIGNATION

I, Josefa Robaina, hereby resign as Vice President/Secretary
(Title)

of Robaina Furniture, Inc.,
(Name of Corporation)

a corporation organized under the laws of the State of Florida

and affirm that the corporation has been notified in writing of the resignation.

Josefa Robaina
(Signature of resigning officer/director)

FILING FEE IS \$35.00

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P.O. Box 6327
Tallahassee, FL 32314**