

2000 UNIFORM BUSINESS REPORT (UBR)

4/2

FILED
May 30, 2000 8:00 am
Secretary of State

04-29-2000 90001 010 ***158.75

DOCUMENT # P99000071478

1. Entity Name

V.M.I. ENTERPRISES, INC.

Principal Place of Business

Mailing Address

5680 SW 88TH AVE.
MIAMI FL 33165

5680 SW 88TH AVE.
MIAMI FL 33173-1681

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0951895

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VAZQUEZ, MAGGIE
5680 SW 88TH AVE.
MIAMI FL 33165
33173

Name

Ignacio Vazquez

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

5680 SW 88th Ave

Miami Fla 33173

City

FL

Zip Code

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

Ignacio Vazquez, President-Director

4-20-2000

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

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President Director
Ignacio Vazquez
5680 SW 88th Ave
MIAMI Fla 33173

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Sec Treasurer
Maggie Vazquez
5680 SW 88th Ave
MIAMI Fla 33173

☐ Delete

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

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

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: Ignacio Vazquez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-2000 305 274 1353
Date Daytime Phone #

CR2E034 (9/99)