## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

## FILED May 14, 2001 8:00 am Secretary of State DOCUMENT # **P99000072457** 1. Entity Name UNIVERSAL HOME DESIGNS CORP. 05-14-2001 90029 014 \*\*\*150.00 Principal Place of Business Mailing Address 8810 SW 131 ST. 7354 SW 60TH STREET MIAMI FL 33176 MIAMI FL 33143 **00053137** 2. Principal Place of Business 3. Mailing Address <u>Universal Home Designs</u> <u>8810 SW 131st Street</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0946267 Miami Not Applicable Fla Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 331-76 Dade Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORONA, HECTOR Street Address (P.O. Box Number is Not Acceptable) 7354 SW 60TH STREET **MIAMI FL 33143** 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 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. PD TITLE ☐ Delete TITLE ☐ Change ☐ Addition CORNA, HECTOR NAME STREET ADDRESS 7354 SW 60TH STREET STREET ADDRESS SAME CITY-ST-ZIP MIAMI FL 33143 CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition CORNA, DENISE NAME NAME SAME 7354 SW 60TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33143 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information copplindicated on this report or supplier tental dwith this filing not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information te and that my signature shall have the same legal effect as if made under oath; that I am an officer or director the this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if is true and of the corporation or the rece changed, or on an attachmer ı allı

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