## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **P99000073740**

MIAMI FL 33186

## BRIAVE SALES & RENTALS CORPORATION

Principal Place of Business 13015 SW 132 AVENUE

Mailing Address

13015 SW 132 AVENUE MIAMI FL 33186-5893

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

## **FILED** Jan 21, 2000 8:00 am Secretary of State

01-21-2000 90053 003 \*\*\*158.75

D0005048



DO NOT WRITE IN THIS SPACE

City & State		City & State				4. FEI Number Applied For 65-0941877 Not Applicable			
Zip	Country	Zìp	Cour	itry	5.	Certificate of Status Desired		<b>8.75</b> A	Additional ired
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
The second secon				Narne PAULA ROIZ					
SCHMACHTENBERG, LEE C 1533 SUNSET DRIVE				Street Addle3013 Bx Whitper13354 ACAEU0(E)					
SUITE 20	11								
CURAL	SABLES FL 33143			City .	MIAMI		FL	zig3	<b>P86</b>
The above nam	ed entity submits his stateme		nging its register	ed office or r	egistered ag	gent, or both, in the State of Florid	a.	2000	

SIGNATURE

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

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00

(NOTE: Registered Agent signature required when reinstating)

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

(See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. PRESIDENT Change ☐ Addition TITLE ☐ Delete TITLE AVELAR, ELIAS AVELAR, ELIAS NAME STREET ADDRESS STREET ADDRESS 13015 SW 132 AVENUE 13015 SW 132 AVENUE CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33186 MIAMI, FL 33186 Change ☐ Addition Delete TITLE VICE PRESIDENT TITLE BRICENO, PEDRO JOSE NAME NAME BRICENO, PEDRO JOSE STREET ADDRESS 13015 SW 132 AVENUE STREET ADDRESS 13015 SW 132 AVENUE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33186 MIAMI, FL 33186 Change Addition ☐ Delete TITLE TITLE **SECRETARY** NAME NAME ROJAS SAULA2AXELABE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33186 CITY-ST-ZIP ☐ Addition ☐ Defete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 of 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:

PAULA ROIZ, SECRETARY

01-10-2000

(305)259-9004

NINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #