

200Q UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000076534

1. Entity Name

HIRAM ENTERPRISES, CO.

FILED

May 02, 2000 8:00 am
Secretary of State

05-02-2000 90040 018 ***158.75

Principal Place of Business

~~8851 NORTH WEST 36TH STREET~~
~~SUITE 600~~
~~MIAMI FL 33166~~

Mailing Address

~~8851 NORTH WEST 36TH STREET~~
~~SUITE 600~~
~~MIAMI FL 33166-0026~~

2. Principal Place of Business

2530 SW 19 AVENUE

3. Mailing Address

8201 NW 66 STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 4

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

05-0943392

Applied For

Not Applicable

Zip

33133

Country

US

Zip

33166

Country

US

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SERRANO, JOSE

~~8851 NORTH WEST 36TH STREET~~

~~SUITE 600~~

~~MIAMI FL 33166~~

Name

SERRANO, JOSE

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

2530 SW 19 AVENUE

City

MIAMI

FL

Zip Code

33133

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 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

PSD

SERRANO, JOSE

~~8851 NORTH WEST 36TH STREET~~

~~MIAMI FL 33166~~

☐ Delete

NEW Address

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2530 SW 19 AVENUE
MIAMI, FL 33133

☒ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

SERRANO, JOSE

4/24/00

305/281-4553

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR20034 (9/99)