

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000077426

1. Entity Name
FELBO OF FLORIDA, INC.

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90059 010 ***150.00

Principal Place of Business
5975 S.W. 137 AVE., UNIT 102
MIAMI FL 33183

Mailing Address
5975 S.W. 137 AVE., UNIT 102
MIAMI FL 33183



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5975 SW 137 Ave

3. Mailing Address
Same

Suite, Apt. #, etc.
#102

Suite, Apt. #, etc.

City & State
Miami FL

City & State

Zip
33183

Country
DADE

Zip

Country

4. FEI Number 65-0941662

Applied For
Not Applicable

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

D'COSTA, ADY'S
5975 S.W. 137 AVE., UNIT 102
MIAMI FL 33183

Name

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

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

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, 2001 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 PD
NAME DCOSTA, ADYS
STREET ADDRESS 5975 S.W. 137 AVE., UNIT 102
CITY-ST-ZIP MIAMI FL 33183 ☐ Delete

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

TITLE VD
NAME BOLANO, FELIPE
STREET ADDRESS 5975 S.W. 137 AVE., UNIT 102
CITY-ST-ZIP MIAMI FL 33183 ☐ Delete

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

TITLE SD
NAME SALAZAR, LISSETTE
STREET ADDRESS 5975 S.W. 137 AVE., UNIT 102
CITY-ST-ZIP MIAMI FL 33183 ☐ Delete

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

TITLE TD
NAME SALAZAR, TAVIS
STREET ADDRESS 5975 S.W. 137 AVE., UNIT 102
CITY-ST-ZIP MIAMI FL 33183 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)