

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000078739

1. Entity Name

C. & S. EXPORT & IMPORT INCORPORATED

FILED
Mar 16, 2000 8:00 am
Secretary of State

03-16-2000 90096 009 ***150.00

Principal Place of Business

Mailing Address

~~2874 NW 72 AVE~~
~~MIAMI FL 33122~~

~~2874 NW 72 AVE~~
~~MIAMI FL 33122-1310~~

2. Principal Place of Business

3051 N. W. 75th AVE

3. Mailing Address

3051 N. W. 75th AVE

Suite, Apt. #, etc.
Miami FL

33122

Suite, Apt. #, etc.
Miami FL

33122

City & State

City & State

4. FEI Number 65-0950164

Applied For
Not Applicable

Zip

Country

Zip

Country

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

CONTRERAS, J FERNANDO

~~2874 NW 72 AVE~~
~~MIAMI FL 33122~~

9783 N. W. 126 Terr
Hialeah FL 33018

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

J. FERNANDO CONTRERAS
PRESIDENT

March 08/2000

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 ☐ Delete
NAME D
STREET ADDRESS CONTRERAS, FERNANDO
CITY-ST-ZIP 9783 N W 126 TER HIALEAH FL 33018

TITLE ☐ Change ☒ Addition
NAME S/D
STREET ADDRESS CARMEN SOLANO
CITY-ST-ZIP 9783 N. W. 126 Terr Hialeah FL 33018

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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:

J. FERNANDO CONTRERAS 03/08/2000 (305) 710-8687
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)