## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATUR

**SIGNATURE:** 

REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## DOCUMENT # P99000081761 1. Entity Name PEREZ-CONDE, INC.

**FILED** Mar 30, 2000 8:00 am Secretary of State

786-242-**6**7963

Name and Address of Current Registered Agent  Perce COUNTY  A State  City & FL  Zio Code  Alter Mark 1, 2000 Fee will be \$550.00  Alter Mark 1, 2000 Fee will be \$100 Fee wil								03-30-2000	90060	D28 ***150	0.00	
Subset, Appl. 4. ecc.  City & State  City &	Principal Place 70305 7849-SW 12980 MIAMI FL 63158	of Business NW 41 STREET 33/7	¥5† +120 8	Mailing Address  -7940 SW 123R0 STREET  MIAMI FL 23156-5311	103 3317	05 NW 4 78	1251	4				
Zip Country Zip Country Application   State   Set to Desired   State Application   Name   Name   State Desired   State Application   Name   Na	Principal Place of Business     3. Mailing Address											
Country   Zip   Country   Zip   Country   S. Certificate of Situs Desired   S. T. Additional Fine Regulated   S. Certificate of Situs Desired   S. Certificate   S. Certificat	Suite, Apt. #	#, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
8. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  8. Name and Address of New Registered Agent  7. Name and Address of New Registered Agent  8. The above names critisy submits this statement to the purpose of changing its registered office or registered agent, or both, in the State of Florida.  8. The above names critisy submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  8. This above names or critisy submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  8. This above names or critisy submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  8. This above names or critisy submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  8. This above names or critisy submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  8. This above names or critisy submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  8. This above names or critisy submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  8. This above names or critisy submits this statement for the purpose of changing its registered office or registered agent	City & State	)		City & State			4.	FEI Number 55-0958600				
PEREZ-CONDE, ISIDRO 7340 SW 123RD STREET   MIAMIFE 33158   Size of Address (P.O. Box Number is Not Acceptable)   Size of Address (P.O. Box Number is Not Acceptable)   Size of Address (P.O. Box Number is Not Acceptable)   Size of Address (P.O. Box Number is Not Acceptable)   Size of Address (P.O. Box Number is Not Acceptable)   Size of Fig.   Size of Address (P.O. Box Number is Not Acceptable)   Size of Final Size of	Zip		Zip	ntry	5 Certificate of Status Desired \$8.7				75 Additional			
PEREZ-CONDE, ISIDRO 7340 SW 123RD STREET MIAMI FL 33158  City FL Zip Code  City FL Z		6 Nome	and Address of Current B	-intered Agent			7.6					
PEREZ-CONDE, ISIDRO 7340 SW 1287B STREET MIAMI FL 33158  City FL Zip Code  SIGNATURE  Sycara, typed or prises there were diffusion away and sits if appread to the purpose of changing its registered officer or registered agent, or both, in the State of Florida.  SIGNATURE  Sycara, typed or prises there were diffusion away and sits if appread to the purpose of changing its registered officer or registered agent, or both, in the State of Florida.  SIGNATURE  Sycara, typed or prises and stately its intengable Task lifting requirement and sites to do so.  (See criteria on basic)  After MAY 1, 2009 Fee will be \$550,00  After MAY 1, 20		o. Name	and Address of Current h	egistered Agent		Name	···············	taine and Address of New It	cgistered	ngont		
MIAMI FL 33158    City   FL   Zip Code	PEREZ-CONDE, ISIDRO											
S. The above named entity submits this statement for the purpose of changing its registered algorit, or both, in the State of Florida.  SIGNATURE  9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  THE PO OBER OFFICERS AND DIRECTORS IN 11  THE OBER OFFICERS AND DIRECTORS IN 11												
SIGNATURE  9. This corporation is eligible to satisfy its intengible favorable in the favor						City			FI	Zip Cod	le	
9. This corporation is eligible to satisfy its intengible Tax filing requirement and elects to do so. [See critical on back)   National Properties of the pr	8. The above	named entit	y submits this statement for	the purpose of changing its	register	ed office or regis	stered ag	ent, or both, in the State of Flo	orida.			
Tax filing requirement and elects to do so.  (See offieria on back)    11.	SIGNATURE _	Signature, typed	or printed name of registered agent an	d title if applicable. (NOT	E Registere	ed Agent signature requ	uired when re	einstating)	DATE			
Tax filing requirement and elects to do so.  (See offieria on back)    11.												
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