

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000083649

1. Entity Name

AZTECA REBAR PLACING CORP.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90070 022 ***150.00

Principal Place of Business

1349 SW 3RD ST.
SUITE #1
MIAMI FL 33130

Mailing Address

1349 SW 3RD ST.
SUITE #1
MIAMI FL 33130

2. Principal Place of Business

1810 NW South River Dr
Suite, Apt. #, etc.

3. Mailing Address

280 SW 8ST
Suite, Apt. #, etc.
BOX 525

City & State

Miami FL

City & State

Miami FL

Zip

3310025

Country

USA

Zip

3310030

Country

USA

4. FEI Number

65-0949453

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HERRERA, ISMAEL
1349 SW 3RD ST.
SUITE #1
MIAMI FL 33130

7. Name and Address of New Registered Agent

Name

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

1810 NW South River Dr

City

Miami

FL

Zip Code

3310025

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 Ismael Herrera

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-16-01

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

TITLE **D** ☐ Delete
NAME **HERRERA, ISMAEL**
STREET ADDRESS **1349 SW 3RD ST.**
CITY-ST-ZIP **MIAMI FL 33130**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **1810 NW South**
STREET ADDRESS **River Dr**
CITY-ST-ZIP **Miami, FL 3310025**

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

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

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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: Ismael Herrera

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/01

Date

786 261 4737

Daytime Phone #

CR2E034 (10/00)