

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000084722

1. Entity Name

LA SIRENA HOLDINGS, INC.

FILED
Jul 26, 2000 8:00 am
Secretary of State

07-26-2000 90009 026 ***150.00

Principal Place of Business

7217 S.W. 48TH ST.
MIAMI FL 33155

Mailing Address

7217 S.W. 48TH ST.
MIAMI FL 33155

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0950618

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ALONSO, AURORA
7217 S.W. 48TH ST.
MIAMI FL 33155

7. Name and Address of New Registered Agent

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	<input type="checkbox"/> Delete
NAME	ALONSO, AURORA	
STREET ADDRESS	7217 S.W. 48TH ST.	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE	D	<input type="checkbox"/> Delete
NAME	BATISTA, WALKYRIA	
STREET ADDRESS	7217 S.W. 48TH ST.	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Signature of Aurora Alonso
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/19/00

Date

Daytime Phone #

CR2E034 (5/00)

011999000084722

B0103554

Attachment

LA SIRENA HOLDINGS, INC.
7217 S.W. 48TH St.
Miami, FL 33155-5518

July 18, 2000

Florida Department of State
Division of Corporation
P.O. Box 6327
Tallahassee, Florida 32314


Gentlemen:

Herewith please find enclosed a check for \$ 150.00 for the year 2000 filing fee.

This is the first year my corporation pays this filing fee because it was incorporated in 1999. The form that you sent is a second notice and was received this past week. I was unaware the time for filing had already passed as I did not received a prior notice.

By means of this letter I am requesting that you waive the higher fee.

Cordially yours,



Aurora Alonso