

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000091650

1. Entity Name
COAX INSURANCE UNDERWRITERS, INC.

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90011 039 ***558.75

Principal Place of Business Mailing Address
~~3011 S.W. 87 AVENUE~~ ~~3011 S.W. 87 AVENUE~~
~~MIAMI FL 33155~~ ~~MIAMI FL 33155-0710~~
4075 S.W. 83rd AVE SAME
SUITE 302, MIAMI, FL. 33155



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
4075 S.W. 83rd AVE. SAME
Suite, Apt. #, etc. Suite, Apt. #, etc.
SUITE 302
City & State City & State
MIAMI, FL.
Zip Country Zip Country
33155

4. FEI Number 65-1018547 Applied For
Not Applicable
5. Certificate of Status Desired X \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
DIAZ-PADRON, JUAN
3011 S.W. 87 AVENUE
MIAMI FL 33155

7. Name and Address of New Registered Agent
Name SAME
Street Address (P.O. Box Number is Not Acceptable)
4075 S.W. 83rd AVE.
Suite 302
City MIAMI, FL. FL Zip Code 33155

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 *Juan M. Diaz-Padron* JUAN M. DIAZ-PADRON
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) President
DATE 6-19-2000

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
TITLE NAME STREET ADDRESS CITY-ST-ZIP
PRESIDENT JUAN DIAZ-PADRON 4075 S.W. 83rd AVE. Suite 302 MIAMI, FL. 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP
SECRETARY CARMEN DIAZ-PADRON 4075 S.W. 83rd AVE. Suite 302 MIAMI, FL. 33155
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
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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: *Juan M. Diaz-Padron* JUAN M. DIAZ-PADRON President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 6-19-2000 Daytime Phone #

CR2E034 (3/99)