## FILED Apr 07, 2003 8:00 am Secretary of State

04-07-2003 90981 025 \*\*\*150.00

## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT #

P99000092385

1. Entity Name

FRANCISCO R. VANEGAS & ASSOCIATES, INC.



Principal Place of Business Mailing Address 12988 S.W. 251ST STREET 12988 S.W. 251ST STREET MIAMI FL 33032 MIAMI FL 33032 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State FEI Number 65-0955633 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name VANEGAS, FRANCISCO R Street Address (P.O. Box Number is Not Acceptable) 12988 S.W. 251ST STREET MIAMI FL 33032 City Zip Code 9. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD ☐ Addition TITLE Delete TITLE NAME VANEGAS, FRANCISCO R NAME 12988 S.W. 251ST ST. STREET ADDRESS STREET ADDRESS **MIAMI FL 33032** CITY-ST-7IP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE VANEGAS, BALTAZARA NAME NAME 12988 S.W. 251ST STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI.FL.33032. \_\_\_ - -----CITY-ST-ZIP" ☐ Delete TITLE ☐ Change ☐ Addition VANEGAS, FREDDY NAME NAME STREET ADDRESS 12988 S.W. 251ST STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL 33032 CITY-ST-ZIP SD Change ☐ Addition TITLE ☐ Delete TITLE VANEGAS, FRANCISCO R JR. NAME NAME 12988 S.W. 251ST STREET STREET ADDRESS STREET ADDRESS MIAMI FL 33032 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GINATURE AND VEED OF SKINNED NAME OF SIGNING OFFICER OR DIRECTOR

CER OR DIRECTOR

Daytime Phone #

CR2E034 (10)