2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachn

SIGNATURE:

FILED DOCUMENT # **P99000092772** Jan 21, 2000 8:00 am 1. Entity Name MEJIA ENTERPRISES, INC. **Secretary of State** 01-21-2000 90114 038 ***150.00 Principal Place of Business Mailing Address 150 SE 25TH RD: SUITE 12-D 150 SE-25TH RD: SUITE-12-D MAMI-FL-33129-MIAMI FL: 33129-2404 2. Principal Place of Business 3. Mailing Address 1509 VERACRUZ LANE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE FLORIDA 1509 VERACRUZ LANE WESTON City & State 4. FEI Number City & State Applied For 65-0957012 FLORIDA 3332 Not Applicable \$8.75 Additional USA. 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent--7.- Name and Address of New Registered Agent RESTREPO. DIEGO L Street Address (P.O. Box Number is Not Acceptable) 150 SE 25TH RD. SUITE 12-D MIAMI FL 33129 Zip Code FL 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 DATE Signature, typed or printed name of registered egent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution, Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. PREDIDEN, DIRECTOR . HEJIA, OSCAR. Addition TITLE TITLE ☐ Delete MEJIA, OSCAR NAME NAME 1509 VERALBUZ LANE **CARRERA-70 NRO: 31-53** STREET ADDRESS STREET ADDRESS WESTON FL, 33327 CITY-ST-ZIP MEDELLIN, ANTIOQUIA-COLUMBIA CITY-ST-ZIP SECRETARY, TREASURER (Change Addition ☐ Delete TITLE TITLE ARANGO HÁBIA ARANGO, MARTA NAME 1509 VERACRUZ LANE **CARRERA 70 NRO: 91-53** STREET ADDRESS STREET ADDRESS MEDELLIN, ANTIOQUIA-COLUMBIA-.CITY_ST-ZIP ... WES FON F.L. 33327 CITY-ST-ZIP. Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7tP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this fing 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 required ror trustee emporate of the execute This report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if