

2001 UNIFORM BUSINESS REPORT (UBR)

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

03-26-2001 90149 017 ***150.00

DOCUMENT # P99000094090

1. Entity Name

LATINCOM CORPORATION

Principal Place of Business

**2021 OAKMONT TERRACE
 CORAL SPRINGS FL 33071**

Mailing Address

**2021 OAKMONT TERRACE
 CORAL SPRINGS FL 33071**

2. Principal Place of Business

111 NE 1ST # 902

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Miami FL

4. FEI Number

65-0963183

Applied For

Not Applicable

Zip

33132

Country

USA

Zip

33132

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**MIRANDA, OSVALDO
 2021 OAKMONT TERRACE
 CORAL SPRINGS FL 33071**

7. Name and Address of New Registered Agent

Name

349 Lakeview Dr.

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

Coral Springs, FL 33071

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 of Osvaldo Miranda)

3/22/01

(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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DP	<input type="checkbox"/> Delete
NAME	MIRANDA, OSVALDO	
STREET ADDRESS	2021 OAKMONT TERRACE	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	DV	<input type="checkbox"/> Delete
NAME	CARVAJALES, JOSE VICTOR	
STREET ADDRESS	2021 OAKMONT TERRACE	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	DS	<input type="checkbox"/> Delete
NAME	CARVAJALES, JORGE	
STREET ADDRESS	2021 OAKMONT TERRACE	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	T	<input type="checkbox"/> Delete
NAME	MIRANDA, FERNANDO	
STREET ADDRESS	2021 OAKMONT TERRACE	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
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"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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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 Osvaldo Miranda)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/01

Date

305-371-4709

Daytime Phone #

CR2E034 (10/00)

0138136