

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000094280

1. Entity Name
B.D.M. AMERICA CO.

FILED
Sep 14, 2000 8:00 am
Secretary of State

09-14-2000 90006 010 ***150.00

Principal Place of Business

12141 S.W. 119TH PLACE
MIAMI FL 33186

Mailing Address

12141 S.W. 119TH PLACE
MIAMI FL 33186

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. EEI Number

65-0968881

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PIEDRA, JORGE L ESQ.
4000 HOLLYWOOD BOULEVARD
SUITE 265-S
HOLLYWOOD FL 33021

Name **MARIA del Carmen Serra MATOS**

Street Address (P.O. Box Number is Not Acceptable)
12141 SW 119TH

City **Miami**

FL

Zip Code **33186**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARIA DEL CARMEN SERRA 12141 S.W. 119TH PLACE MIAMI FL 33186	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

Attachment
DT# 279000094280
D0085491

B.D.M. AMERICA CORPORATION

Costa D' Oro Olive Oil

12141 S.W. 119th Place * Miami, FL 33186
Tel/Fax: (305) 238-5758 * Cel: (305) 213-4446

Monday, September 11, 2000

Division of corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahessee, Fl 32302-1500

Sir:

Please accept the amount of \$150.00 dollars, as payment for filing fee for our new corporation. B. D. M. AMERICA CORPORATION.

We were not aware of the due date . We have never recived any information regarding the first due date. We apologize for this delay and appreciate your help in this matter.

Payment enclose with the only notice we recived.

If there is any question, please call our office, at 305 238-5758.

Thank you very much for your attention.

Sincerely


Maria Serra Matos