

2000 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED

Jul 11, 2000 8:00 am
Secretary of State

05-18-2000 90390 046 ***150.00

DOCUMENT # P99000103227

1. Entity Name

PONCE DE LEON INTERIOR ART, INC.

Principal Place of Business

731 CYPRESS LANE #C
POMPANO BEACH FL 33064

Mailing Address

731 CYPRESS LANE #C
POMPANO BEACH FL 33064

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

731 CYPRESS LANE #C
POMPANO BEACH FL 33064

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0965493

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

Name

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

City

FL

Zip Code

ALVAREZ, JUAN M

731 CYPRESS LANE #C
POMPANO BEACH FL 33064

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, typewritten, printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

04-27-2000

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	PRESIDENT	<input type="checkbox"/> Delete
NAME	JUAN MARTIN ALVAREZ	
STREET ADDRESS	731 CYPRESS LANE #C-8	
CITY-ST-ZIP	POMPANO BEACH FL 33064	
TITLE	PRESIDENT	<input type="checkbox"/> Delete
NAME	JUAN MARTIN ALVAREZ	
STREET ADDRESS	731 CYPRESS LANE #C	
CITY-ST-ZIP	POMPANO BEACH FL 33064	
TITLE	PRESIDENT	<input type="checkbox"/> Delete
NAME	JUAN MARTIN ALVAREZ	
STREET ADDRESS	731 CYPRESS LANE #C	
CITY-ST-ZIP	POMPANO BEACH FL 33064	
TITLE	PRESIDENT	<input type="checkbox"/> Delete
NAME	JUAN MARTIN ALVAREZ	
STREET ADDRESS	731 CYPRESS LANE #C	
CITY-ST-ZIP	POMPANO BEACH FL 33064	
TITLE	PRESIDENT	<input type="checkbox"/> Delete
NAME	JUAN MARTIN ALVAREZ	
STREET ADDRESS	731 CYPRESS LANE #C	
CITY-ST-ZIP	POMPANO BEACH FL 33064	
TITLE	PRESIDENT	<input type="checkbox"/> Delete
NAME	JUAN MARTIN ALVAREZ	
STREET ADDRESS	731 CYPRESS LANE #C	
CITY-ST-ZIP	POMPANO BEACH FL 33064	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-27-2000

Date

Daytime Phone #

(954) 2941244

CR2E034 (999)