

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90736 032 ***150.00

DOCUMENT # **ALLIED ENG. CORP.**

1. Entity Name

S23019 ✓

DO NOT WRITE IN THIS SPACE

B0061819

2. Principal Place of Business
13935 SW 252 ST
Suite, Apt. #, etc.

3. Mailing Address
SAME
Suite, Apt. #, etc.

City & State **Miami FL**

City & State

4. FEJ Number
65-0235697

Applied For
Not Applicable

Zip
33032

Country
US

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **JORGE VILA**

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

13935 SW 252 ST.

City **Miami**

FL

Zip Code **33032**

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 **Jorge Vila President**
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

3-30-02
DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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**
NAME **JORGE VILA**
STREET ADDRESS **11346 SW 85 LANE.**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE **Vice President**
NAME **JAVIER VILA**
STREET ADDRESS **1785 S W 14 ST.**
CITY-ST-ZIP **MIAMI FL 33176**

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IN THIS SPACE**

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 on an attachment with an address with all other like empowered.

SIGNATURE: **Jorge Vila**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JORGE VILA

3-30-02
Date

305-257-1491
Daytime Phone #

CR2E034B (12/01)