

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 23, 2002 8:00 am**  
**Secretary of State**

07-23-2002 90334 039 \*\*\*150.00

**DOCUMENT # S24606**

1. Entity Name  
**SERGIO FELIPE PRODUCE CORP.**

Principal Place of Business

**920 S.W. 11TH AVE.  
 MIAMI FL 33130**

Mailing Address

**920 S.W. 11TH AVE.  
 MIAMI FL 33130**

**B0131362**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0237821**

Applied For  
 Not Applicable

Zip Country Zip Country

6. 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

**FELIPE, SERGIO  
 920 S.W. 11TH AVENUE  
 MIAMI FL 33130**

Name

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

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. I am familiar with, and accept the obligations of registered agent.

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, 2002 Fee 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 **P** ☒ Delete  
 NAME **FELIPE, SERGIO**  
 STREET ADDRESS **920 S.W. 11TH AVENUE**  
 CITY-ST-ZIP **MIAMI FL 33130**

TITLE **President = P** ☒ Change ☐ Addition  
 NAME **Pedro Gonzalez, Jr.**  
 STREET ADDRESS **1444 S.W. 97TH AVE.**  
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE **V** ☐ Delete  
 NAME **FELIPE, RAMONA**  
 STREET ADDRESS **920 S.W. 11TH AVENUE**  
 CITY-ST-ZIP **MIAMI FL 33130**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

CR2E034 (4/02)

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 REQUIRED**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

07/16/02

Miami 07/16/02

Sergio Felipe Produce Corp.  
920 SW 11 AVE  
Miami, FL 33130

FL Department of State  
Division of Corporation

Attachment  
#52460

Enclosed is the yearly fee of \$150.00. I contacted your office on 7/15/02 upon receiving a late notification and explained by phone that I never received a regular statement or notice to pay. This is the first time since my last payment in 2001 that I receive notice from your office.

I was told to include my usual fee for \$150.00 attached to the form. Please let me know if you need further information.

Sincerely,

Sergio Felipe  
President

