

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90156 045 ***158.75

DOCUMENT # S41304

1. Entity Name
FECHA, INC.

Principal Place of Business
3011 SOUTHWEST 67TH AVENUE
MIAMI FL 33155

Mailing Address
3011 SOUTHWEST 67TH AVENUE
MIAMI FL 33155

2. Principal Place of Business
4075 S.W. 83 Ave.
Suite, Apt. #, etc.

3. Mailing Address
4075 S.W. 83 Ave.
Suite, Apt. #, etc.

City & State
MIAMI, FL
Zip
33155
Country
USA

City & State
MIAMI, FL
Zip
33155
Country
USA

4. FEI Number 65-0306614

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

DIAZ-PADRON, CARLOS
250 BIRD ROAD
SUITE 206
CORAL GABLES FL 33146

7. Name and Address of New Registered Agent

Name DIAZ-PADRON, CARLOS
Street Address (P.O. Box Number is Not Acceptable)
3911 S.W. 67 Ave.
City MIAMI FL Zip Code 33155

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 Miguel S. Feris per. DATE 1-17-2001

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

TITLE D
NAME FERIS, MIGUEL E.
STREET ADDRESS 3011 SW 67 AVE.
CITY-ST-ZIP MIAMI-FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 4075 S.W. 83 Ave.
CITY-ST-ZIP MIAMI, FL 33155

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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TITLE
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: Miguel S. Feris per. DATE 1-17-2001 305-554-0353

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)