

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

02 JAN 28, PM 4:13

DOCUMENT # 569241

1. Entity Name

DENIS IMPORT CORP

Principal Place of Business

Mailing Address

1736 N.W. 20 St.

MIAMI FLORIDA 33142

2. Principal Place of Business

1736 N.W. 20 St.

3. Mailing Address

1736 N.W. 20 St.

Suite, Apt. #, etc.

MIAMI FLORIDA

Suite, Apt. #, etc.

MIAMI FLORIDA

City & State

City & State

Zip

33142

Country

Zip

33142

Country

4. FEI Number

65-1320698

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RAMIRO MERLO

10305 S.W. 3RD St

MIAMI FL 33174

7. Name and Address of New Registered Agent

Name

RAMIRO MERLO

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

10305 S.W. 3 St.

City

MIAMI

FL

Zip Code 33174

8. The above named agent 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 fee if applicable)

(NOTE: Registered Agent signature required when reissuing)

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 \$8,150.00

AFTER MAY 1, 2001, Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

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\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME PD T RAMIRO MERLO
STREET ADDRESS 10305 S.W. 3 St.
CITY-STATE-ZIP Miami FL 33174

☐ Delete

TITLE NAME VDT CORALIA MERLO
STREET ADDRESS 10305 S.W. 3 St.
CITY-STATE-ZIP MIAMI FL 33174

☐ Delete

TITLE NAME
STREET ADDRESS
CITY-STATE-ZIP

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TITLE NAME
STREET ADDRESS
CITY-STATE-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ Change ☐ Addition

TITLE NAME
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CITY-STATE-ZIP

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CITY-STATE-ZIP

☐ Change ☐ 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 affidavit, with or without the empowered.

SIGNATURE:

(Signature and typed or printed name of signing officer or director)

Date

Typed Name

Ramiro Merlo President 1/20/02

REINSTATEMENT

PLEASE WRITE IN THIS SPACE

01/02

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*****900.00 *****900.00