

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90069 017 ***150.00

DOCUMENT # S84576

1. Entity Name

CARTAYA-PELAYO ARCHITECTS, P.A.

Principal Place of Business

3077 E. COMMERCIAL BLVD
#400A 200
FORT LAUDERDALE FL 33308
US

Mailing Address

3077 E. COMMERCIAL BLVD
#400A 200
FORT LAUDERDALE FL 33308
US

2. Principal Place of Business

3077 E. COMMERCIAL BLVD

Suite, Apt. #, etc.

200

3. Mailing Address

3077 E. COMMERCIAL BLVD

Suite, Apt. #, etc.

200

City & State

FT LAUDERDALE FL

City & State

FT LAUDERDALE

Zip

33308

Country

US

Zip

33308

Country

US

4. FEI Number

65-0285630

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PELAYO, JOSE

2000 S DIXIE HWY

MIAMI FL 33133

3077 E. COMMERCIAL BLVD

FORT LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(Signature of registered Agent Signature required when reinstating)

DATE

1/18/01

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	<input type="checkbox"/> Delete
NAME	PELAYO, JOSE	
STREET ADDRESS	2000 S DIXIE HWY	SEE NEW ADDRESS ABOVE
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	CARTAYA, MARIO	
STREET ADDRESS	2000 S DIXIE HWY	SEE NEW ADDRESS ABOVE
CITY-ST-ZIP	CORAL GABLES FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

JOSE PELAYO

Date

1/18/01

Daytime Phone #

(954) 771-2724

CR2E034 (10/00)