

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 09, 2002 8:00 am**  
**Secretary of State**

05-09-2002 90067 048 \*\*\*150.00

**DOCUMENT # S84996**

1. Entity Name

URYS CORPORATION

Principal Place of Business

2318 WEST 70TH STREET  
 HIALEAH FL 33016  
 US

Mailing Address

C/O AKERMAN SENTERFITT  
 1 SE 3 AVENUE, 28 FL  
 MIAMI FL 33131  
 US

2. Principal Place of Business

2360 West 78 Street

3. Mailing Address

2360 W 78 Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HIALEAH, FL

City & State

HIALEAH, FL

Zip

33016

Country

Zip

33016

Country

4. FEI Number

65-0310462

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

AMERICAN INFORMATION SERVICES  
 1 SE 3RD AVENUE  
 28TH FLOOR  
 MIAMI FL 33131

7. Name and Address of New Registered Agent

Name Ruiz, Lesmes

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

2360 W 78 ST

City

HIALEAH

FL

Zip Code

33016

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.

(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 \$150.00**  
**After May 1, 2002 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	PS	<input type="checkbox"/> Delete
NAME	RUIZ, LESMES	
STREET ADDRESS	2318 WEST 78TH STREET	
CITY-ST-ZIP	HIALEAH FL 33016	
TITLE	VTD	<input type="checkbox"/> Delete
NAME	URIBE, ALBERTO	
STREET ADDRESS	2318 WEST 78TH STREET	
CITY-ST-ZIP	HIALEAH FL 33016	
TITLE	D	<input type="checkbox"/> Delete
NAME	URIBE, YVONNE	
STREET ADDRESS	2318 WEST 78TH STREET	
CITY-ST-ZIP	HIALEAH FL 33016	
TITLE	D	<input type="checkbox"/> Delete
NAME	ALBARRAN, MANUEL	
STREET ADDRESS	2318 WEST 78TH STREET	
CITY-ST-ZIP	HIALEAH FL 33016	
TITLE	VPCF	<input checked="" type="checkbox"/> Delete
NAME	URREGO, FERNANDO	
STREET ADDRESS	2318 WEST 78TH STREET	
CITY-ST-ZIP	HIALEAH FL 33016	
TITLE	VP	<input type="checkbox"/> Delete
NAME	FUENTES, ALEJANDRO C	
STREET ADDRESS	2318 WEST 78TH STREET	
CITY-ST-ZIP	HIALEAH FL 33016	

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

4/8/2

305-820-0306

Date

Daytime Phone #

CR2E034 (9/01)