2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 06, 2001 8:00 am
Secretary of State
04-06-2001 90015 022 ***150.00

DOCUMENT # S94449

1. Entity Name
C&Z ENTERPRISES GROUP INC.

✓

Principal Place of Business	Mailing Address
7226 N.W 56th STREET MIAMI - FLORIDA 33166	Same.-

A0043229

2. Principal Place of Business	3. Mailing Address
7226 N.W 56Th Street	Same.-
Suite, Apt #, etc. Miami - Florida	Suite, Apt. #, etc
City & State Miami - Florida	City & State
Zip 33166 / Country MIAMI-DADE	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0295146 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

Martha Zambrano
7509 West 31 Avenue
Hialeah - FLorida 33108

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 ______________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Martha Zambrano 7509 West 31 Avenue Hialeah - Florida 33108 President ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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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: Martha Date: 4-2-01 Telephone: 305-8891866