

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 06, 2001 8:00 am**  
**Secretary of State**

04-06-2001 90009 042 \*\*\*150.00

0217624

**DOCUMENT # V14885**

1. Entity Name

**D'GEORGE INTERNATIONAL OF MIAMI, INC.**

Principal Place of Business

**890 SW 87 AVE  
STE 22  
MIAMI FL 33174  
US**

Mailing Address

**890 SW 87 AVE  
STE 22  
MIAMI FL 33174  
US**

2. Principal Place of Business

**890 SW 87 AVE  
Suite, Apt. #, etc.  
SUITE # 22**

3. Mailing Address

**890 SW 87 AVE  
Suite, Apt. #, etc.  
SUITE # 22**

City & State

**MIAMI - FLORIDA**

City & State

**MIAMI - FLORIDA**

Zip

**33174**

Country

**U.S.A.**

Zip

**33174**

Country

**U.S.A.**

6. Name and Address of Current Registered Agent

**PERDIGON, JORGE  
12444 SW 27 ST  
MIAMI FL**

7. Name and Address of New Registered Agent

Name **JORGE PERDIGON**

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

**12444 SW 27 ST**

City

**MIAMI**

**FL**

Zip Code

**33175**

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

**JORGE PERDIGON**

(NOTE: Registered Agent signature required when reinstating)

**2-24-01**

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, 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 **PT** ☐ Delete  
NAME **PERDIGON, JORGE**  
STREET ADDRESS **12444 SW 27 ST**  
CITY-ST-ZIP **MIAMI FL 33175**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME **FEIJOO, BOLIVAR**  
STREET ADDRESS **12444 SW 27 ST**  
CITY-ST-ZIP **MIAMI - FL - 33175**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ 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

**JORGE PERDIGON - PRESIDENT**

Date

**3/31/01 (305) 291-0704**

Daytime Phone #

CR2E034 (10/00)