

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 06, 2002 8:00 am**  
**Secretary of State**

05-06-2002 90256 002 \*\*\*150.00

**DOCUMENT # V32011**

1. Entity Name  
**YOBELI CORPORATION**

Principal Place of Business

**7800 SW 73 PLACE  
 MIAMI FL 33143**

Mailing Address

**7800 SW 73 PLACE  
 MIAMI FL 33143**

US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

- City & State

City & State

4. FEI Number **65-0346432**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BELTRAN, ELIZABETH  
 7800 SW 73 PLACE  
 MIAMI FL 33143**

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.

(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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VPSD** ☐ Delete  
 NAME **BELTRAN, ELIZABETH**  
 STREET ADDRESS **8355 SW 56 ST**  
 CITY-ST-ZIP **MIAMI FL**

TITLE **VPSD** ☒ Change ☐ Addition  
 NAME **BELTRAN, ELIZABETH**  
 STREET ADDRESS **7800 SW 73 PL**  
 CITY-ST-ZIP **MIAMI, FL 33143**

TITLE **PD** ☐ Delete  
 NAME **BELTRAN, YOLANDA**  
 STREET ADDRESS **8355 SW 56 ST**  
 CITY-ST-ZIP **MIAMI FL**

TITLE **PD** ☒ Change ☐ Addition  
 NAME **BELTRAN, YOLANDA**  
 STREET ADDRESS **7800 SW 73 PL**  
 CITY-ST-ZIP **MIAMI, FL 33143**

TITLE **TD** ☒ Delete  
 NAME **RODRIGUEZ, RENE**  
 STREET ADDRESS **8355 SW 56 ST**  
 CITY-ST-ZIP **MIAMI FL**

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
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 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: **Elizabeth Beltran**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/22/02 (305) 667-5088**

Date

Daytime Phone #

CR2E034 (9/01)