

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State
 04-17-2001 90153 015 ***150.00

DOCUMENT # V67905

1. Entity Name
DEMARK CARGO, INC.

Principal Place of Business

1950 N W 70TH AVE
 MIAMI FL 33126
 US

Mailing Address

PO BOX 52-1456
 MIAMI FL 33152-1456
 US

00038086



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

11421 N.W. 39th Street

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

miami, Florida

City & State

4. FEI Number

65-0359291

Applied For

Not Applicable

Zip

33178

Country

U.S.A

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

ROMIREZ MIRNA
1950 NW 70TH AVE
MIAMI FL 33126

Name

Ramirez MIRNA

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

11421 N.W. 39th Street

City

miami

FL

Zip Code

33178

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

MIRNA Ramirez - President

04-11-01

(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, 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 ☐ Delete
 NAME **PD**
 STREET ADDRESS **RAMIREZ, MIRNA**
 CITY-ST-ZIP **1950 NW 70TH AVE**
MIAMI FL 33126

TITLE ☒ Change ☐ Addition
 NAME **PD**
 STREET ADDRESS **Ramirez, mirna**
 CITY-ST-ZIP **11421 N.W. 39th Street**
miami, FL 33178

TITLE ☐ Delete
 NAME **SD**
 STREET ADDRESS **RAMIREZ, RAMIRO M.**
 CITY-ST-ZIP **1950 NW 70TH AVE**
MIAMI FL 33126

TITLE ☒ Change ☐ Addition
 NAME **SD**
 STREET ADDRESS **Ramirez, Ramiro m.**
 CITY-ST-ZIP **11421 N.W. 39th Street**
miami, FL 33178

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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 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] - **MIRNA Ramirez**

04-11-01

305 477-0046

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)