

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 23, 2001 8:00 am  
Secretary of State

04-23-2001 90117 039 \*\*\*150.00

DOCUMENT # PQ00G0079139

1. Entity Name

FINE RITE SUPERVISION, INC.

Principal Place of Business

3151 N. COURSE LANE  
SUITE 106  
POMPAN0 BEACH FL 33069

Mailing Address

3151 N. COURSE LANE  
SUITE 106  
POMPAN0 BEACH FL 33069

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1059066

Applied For

Not Applicable

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

REY, SANDRA  
119 GARDENS DRIVE  
APT. 101  
POMPAN0 BEACH FL 33069

Name

MARIANA GOZON

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

2861 N. OAKLAND FOREST DR., APT. 101

City

FT. LAUDERDALE

FL

Zip Code

33309

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, 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 D ☐ Delete  
NAME HILSBURG, BEATRIZ  
STREET ADDRESS 3151 N. COURSE LANE  
CITY-ST-ZIP POMPAN0 BEACH FL 33069

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

TITLE D ☐ Delete  
NAME MARIANA GOZON  
STREET ADDRESS 2861 N. OAKLAND FOREST DR. APT. 101  
CITY-ST-ZIP FT. LAUDERDALE, FL 33309

TITLE D ☐ Change ☒ Addition  
NAME MARIANA GOZON  
STREET ADDRESS 2861 N. OAKLAND FOREST DR., APT. 101  
CITY-ST-ZIP FT. LAUDERDALE, FL 33309

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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CITY-ST-ZIP

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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

3/6/01

Date

954-978-8300

Daytime Phone #

CR2E034 (10/00)