

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name **P97 000047848**

**AMPRO SERVICES, INC**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 OCT 13 PM 4:17

Principal Place of Business Mailing Address  
**15963 SW 139ST** **Same**  
**MIAMI, FL 33196**

2. Principal Place of Business 3. Mailing Address  
**SAME** **SAME**  
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **65-0762515** Applied For Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**GONCALO TOVAR**  
**15963 SW 139ST**  
**MIAMI, FL 33196**

7. Name and Address of New Registered Agent  
Name **CESAR CUNEO**  
Street Address (P.O. Box Number is Not Acceptable) **15963 SW 139ST**  
**MIAMI, FL 33196**  
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 **GONCALO TOVAR** **CESAR CUNEO** **10/05/00**  
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, 2000 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	<b>PTD</b>	<input type="checkbox"/> Delete
NAME	<b>CESAR CUNEO</b>	
STREET ADDRESS	<b>15963 SW 139ST</b>	
CITY-ST-ZIP	<b>MIAMI, FL 33196</b>	
TITLE	<b>VICE PRESIDENT</b>	<input type="checkbox"/> Delete
NAME	<b>GONCALO TOVAR</b>	
STREET ADDRESS	<b>15963 SW 139ST</b>	
CITY-ST-ZIP	<b>MIAMI, FL 33196</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
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TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		

**000003434170-1**  
**-10/20/00-01036-019**  
**\*\*\*150.00 \*\*\*150.00**

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: **GONCALO TOVAR** **10/5/00** **305 232-2102**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)

# AMPRO SERVICES, INC

15963 SW 139 ST  
Miami, Florida 33196  
Tel. : (305) 232-2102  
Fax. : (305) 232-2227

Miami October 10, 2000

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

DEAR SIR,

Our company moved early this year to it's no new address of 15963 SW 139 ST, Miami, Fl 33196. So for some reason we didn't received a 2000 uniform business report, so we didn't file accordingly. We are really sorry about this and we ask for your to understand the we are a very small company, home based and are not doing to much business. At the same time we don't have the experience and all documents and forms we need to be file each year. We recently found that didn't file so we have requested this form which we are sending. We hope that you understand this a give us chance. We cannot afford to pay a bigger fee, which will hurt us.

Sincerely,



Gonzalo E. Tovar