## 2001 UNIFORM BUSINESS REPORT (UBR) Apr 28, 2001 8:00 am Secretary of State **DOCUMENT # V08370** Environ mental, tuc ALL AMERICAN UNIVERSAL, INC. 04-28-2001 90095 024 \*\*\*150.00 Principal Place of Business Mailing Address 5925 RAVENSWOOD RD 5925 RAVENSWOOD RD BLDG D-BAY 1 BLDG D-BAY 1 **DANIA FL 33312 DANIA FL 33312** US 2. Principal Place of Business 639 NW 12 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0307708 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent URBINA, ANTONIO 2710 SHERIDAN ST HOLLYWOOD FL 33020 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 (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITI F CR2E034 (10/00) Delete ☐ Addition URBINA, ANTONIO NAME STREET ADDRESS 2710 SHERIDAN ST STREET ADDRESS CITY-\$T-ZIP HOLLYWOOD FL CITY-ST-ZIP VST TITLE **Delete** TITLE NAME URBINA, RENE NAME STREET ADDRESS 2710 SHERIDAN ST STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL CITY-ST-7IP TITLE TITLE Urbina, rene NAME NAME STREET ADDRESS 2710 SHERIDAN ST STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL CITY-ST-ZIP TITLE ☐ Detete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ... Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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. changed, or on an attachment With an addres SIGNATURE: