

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2000 8:00 am
Secretary of State
03-03-2000 90245 049 ***150.00

DOCUMENT # P99000016764

1. Entity Name

3016 Co. ✓

Principal Place of Business

Mailing Address

13941 S.W. 52 Terrace
Miami, Florida 33175

13941 S.W. 52 Terrace
Miami, Florida 33175

2. Principal Place of Business

1301 N.E. 191 Street

3. Mailing Address

1301 N.E. 191 Street

Suite, Apt. #, etc.

#F 401

Suite, Apt. #, etc.

#F 401

City & State

Miami, Florida

City & State

Miami, Florida

4. FEI Number

Applied For

☒ Not Applicable

Zip

33179

Country

USA

Zip

33179

Country

USA

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

Baruch Spivak
13941 S.W. 52 Terrace
Miami, Florida 33175

Name

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

1301 N.E. 191 Street

#F 401

City

Miami

FL

Zip Code
33179

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, 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
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Baruch Spivak
13941 S.W. 52 Terrace
Miami, Florida 33175 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Baruch Spivak
1301 N.E. 191 St. #F 401
Miami, Florida 33179 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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: Baruch Spivak BARUCH SPIVAK

2-22-00

305-948-8700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)