

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 489034

1. Entity Name

BIRD DOUGLAS SERVICE STATION, INC.

Principal Place of Business

3010 SW 37TH AVE
MIAMI FL 33133

Mailing Address

3010 SW 37TH AVE
MIAMI FL 33133-4311

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

59-1630865

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PHILLIPS, STEVE
3010 S.W. 37TH AVENUE
MIAMI FL 33130

7. Name and Address of New Registered Agent

Name

ELAINE PHILLIPS

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

3010 SW 37 AVE

City

MIAMI

FL

Zip Code

33133

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

President

4/27/00

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

TITLE ☒ Delete

NAME PHILLIPS, STEVE
STREET ADDRESS 3010 S.W. 37TH AVE.
CITY-ST-ZIP MIAMI FL 33133

TITLE ☐ Delete

NAME PHILLIPS, ELAINE
STREET ADDRESS 3010 S.W. 37 AVE.
CITY-ST-ZIP MIAMI FL 33133

TITLE ☐ Delete

NAME PHILLIPS, RICHARD
STREET ADDRESS 3010 SW 37 AVE
CITY-ST-ZIP MIAMI FL 33133

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

D
ANDREW PHILIPPOU
3010 SW 37 AVE
MIAMI, FL 33133

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

ELAINE PHILLIPS

Date

Daytime Phone #

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90111 031 ***150.00



DO NOT WRITE IN THIS SPACE