

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 648560

1. Entity Name

JACOBO SALTY & ASSOCIATES, INC.

(R)

FILED
Aug 16, 2000 8:00 am
Secretary of State

08-16-2000 90005 021 ***150.00

Principal Place of Business

10470 S.W. 16TH ST.
MIAMI FL 33165

Mailing Address

10470 S.W. 16TH ST.
MIAMI FL 33165

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 59-1956057

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

SALTY, JACOBO
10470 S.W. 16TH ST.
MIAMI FL 33165

Name

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

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

SEE Enclosed letter

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 PD ☐ Delete
NAME SALTY, JACOBO
STREET ADDRESS 10470 S.W. 16TH ST.
CITY-ST-ZIP MIAMI FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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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 REQUIRED

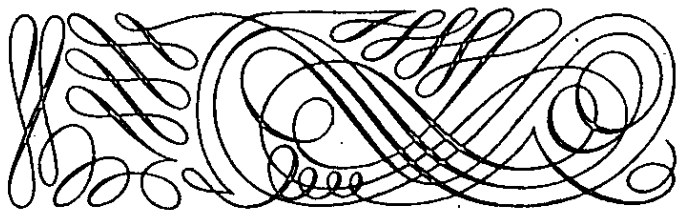
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jacobo Salty

Date

Daytime Phone #

CR2E034 (5/00)



Attachment
DT# 648560

DD79311

Jacobo Salty & Associates

Space Planning & Architectural Interiors

10470 S W 16th Street, Miami, Fla. 33165

TELEPHONE 305-553-0759

DIVISION of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

8/12/00

Dear Sir/MADAM

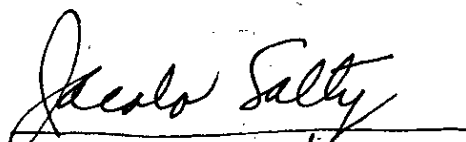
I AM writting in response to document #648560 which requests a payment of 550⁰⁰ Dollars for the 2000 UNIFORM business report. I have contacted the number shown on your form (850) 488-9000 asking why 550⁰⁰ dollars (which includes penalties) instead of the customary 150⁰⁰ which I have been paying promptly for more than 10 years.

I was advised that such amount was charged as a consequence of not paying on my first notice. However, as I disussed in my telephone conversation, I did not received the usual first notice which prompts me to make my yearly early payment. I was told to send you a check for 150⁰⁰ plus this explanatory letter.

Please, take into Consideration the above described circumstances, and accept my enclosed payment as my yearly fee. otherwise as a small business the penalty will place an "undue burden" on my business.

thanks in advance for your prompt attention in this regard.

Very truly yours


Jacobo Salty