

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 04, 2002 8:00 am
Secretary of State

09-04-2002 90093 041 ***150.00

DOCUMENT # F54634

1. Entity Name
MIKE'S PRECISION, INC.

Principal Place of Business

% MIGUEL CARRODEGUAS
1929 W 76TH ST
HIALEAH FL 33014

Mailing Address

% MIGUEL CARRODEGUAS
1929 W 76TH ST
HIALEAH FL 33014

978159



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2162919**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

CARRODEGUAS, MIGUEL
1929 W. 76TH STREET
HIALEAH FL 33014

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee 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 NAME STREET ADDRESS CITY-ST-ZIP	PST CARRODEGUAS, MIGUEL 1929 W. 76TH ST. HIALEAH FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARRODEGUAS, MIGUEL 1929 W. 76TH ST. HIALEAH FL	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Miguel Carrodeguas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

Attachment # F54634
978159

MIKE'S

PRECISION, INC.

TOOLS - MOLDS - DIES - JIGS - FIXTURES - MEDICAL EQUIPMENT - INJECTION MOLDING

AUGUST 26, 2002

FLORIDA DEPARTMENT OF STATE
DIVISIONS OF CORPORATIONS

REF. DOCUMENT # F54634
FEI NUMBER 59-2162919

I DID NOT RECEIVE A PRIOR NOTICE AND I WOULD LIKE THE LATE FEE TO BE
WAIVED AT THIS TIME. I'M ENCLOSING OUR CHECK IN THE AMOUNT OF \$150.00.
I SPOKE TO ONE OF YOUR REPRESENTATIVE AND I AM AWARE THAT THE BILL SHOULD
BE MAILED TO ME IN JANUARY OR FEBRUARY OF EVERY YEAR AND I HAVE MADE A
NOT OF THIS FOR THAT THIS WILL NOT OCCUR IN THE FUTURE.

SINCERELY,


MIGUEL CARRODEGUAS
PRESIDENT