

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G51203

1. Entity Name

INTERNATIONAL RESOURCE SERVICES, INC.

FILED

Mar 10, 2000 8:00 am
Secretary of State

03-10-2000 90025 035 ***150.00

Principal Place of Business

Mailing Address

5750 N.W. 32 CT
MIAMI FL 33142
US

5750 N.W. 32 COURT
MIAMI FL 33142-2141
US

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

59-2243989

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

WINN, RICHARD L.
273 FLORIDA AVE
MIAMI SPRINGS FL 33166

Name

WINN, RICHARD L.
Street Address (P.O. Box Number is Not Acceptable)

230 N.E. 104 STREET

City

MIAMI SHORES

FL

Zip Code

33138

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

Richard L. Winn
Richard L. Winn, PRES

(NOTE: Registered Agent signature required when reinstating)

3-6-00

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 D ☐ Delete
NAME SETOLA, NANCY
STREET ADDRESS 273 FLORIDA AVE
CITY-ST-ZIP MIAMI SPRINGS FL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 230 NE 104 STREET
CITY-ST-ZIP MIAMI SHORES, FL 33138

TITLE DPC ☐ Delete
NAME WINN, RICHARD L.
STREET ADDRESS 273 FLORIDA AVE
CITY-ST-ZIP MIAMI SPRINGS FL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 230 NE 104 ST STREET
CITY-ST-ZIP MIAMI SHORES, FL 33138

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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)(f), 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:

Richard L. Winn
Richard L. Winn, PRES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-6-00

DATE

305-637-7800

Daytime Phone #

CR2E034 (9/99)