

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G62017

1. Entity Name

FULSERVICE INTERNATIONAL, INC.

FILED
Jun 01, 2001 8:00 am
Secretary of State

06-01-2001 90005 027 ***550.00

0187575

Principal Place of Business

Mailing Address

P O BOX 52-0082
MIAMI FL 33152

P O BOX 52-0082
MIAMI FL 33152

C0070724



DO NOT WRITE IN THIS SPACE

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 **59-2328474**

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

VILLARREAL, FULVIA
11780 S.W. 18 ST. #403
MIAMI FL

Name **VILLARREAL, FULVIA**
Street Address (P.O. Box Number is Not Acceptable)
12060 SW 19th Lane

Suite #203

City **Miami**

FL

Zip Code
33175

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 *Felvia Villarreal - President - Fulvia Villarreal*

(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!
After MAY 1, 2001
Fee IS \$150.00
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 ☐ Delete
NAME **PD**
STREET ADDRESS **VILLARREAL, FULVIA**
CITY-ST-ZIP **11780 S.W. 18 ST #403**
MIAMI FL

TITLE ☐ Change ☐ Addition
NAME **PD**
STREET ADDRESS **VILLARREAL, FULVIA**
CITY-ST-ZIP **12060 SW 19lane #203**
Miami, Florida 33175

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **VILLARREAL, OMAIDA DE**
CITY-ST-ZIP **11780 S.W. 18 ST #403**
MIAMI FL

TITLE ☐ Change ☐ Addition
NAME **D**
STREET ADDRESS **VILLARREAL, OMAIDA DE**
CITY-ST-ZIP **12060 SW 19 lane #203**
Miami, Florida 33175

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **YHAP, CLEMENTINA**
CITY-ST-ZIP **11780 S W 18 ST. #403**
MIAMI FL

TITLE ☐ Change ☐ Addition
NAME **T**
STREET ADDRESS **YHAP, CLEMENTINA**
CITY-ST-ZIP **12060 SW 19 lane #203**
Miami, Florida 33175

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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)(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: *Felvia Villarreal*

May 29, 2001

(305) 553-1518

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)