

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2000 8:00 am
Secretary of State

05-23-2000 90269 045 ***150.00

DOCUMENT # K53513

1. Entity Name

CARDEL FIRE PROTECTION, INC.

Principal Place of Business

Mailing Address

1430 NW 108TH AVE
 SUITE 101
 MIAMI FL 33172

1430 NW 108TH AVE
 SUITE 101
 MIAMI FL 33172-2004

2. Principal Place of Business

3. Mailing Address

1430 NW 108th Ave, Suite 101
 Suite, Apt. #, etc.

1430 NW 108th Ave, Suite 101
 Suite, Apt. #, etc.

Miami
 City & State

Miami
 City & State

FLORIDA
 Zip

Country

33172-2004

USA

Zip

Country

33172-2004

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0157963

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

~~CARBALLO, DELIA R.~~
~~4297 SW 75TH AVE~~
~~MIAMI FL 33155~~

Correction of address:

Name

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

1430 NW 108 AVENUE
SUITE 101

City

MIAMI

FL

Zip Code

33172-

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.

2000

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 \$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 PD Delete
 NAME CARBALLO, JORGE R.
 STREET ADDRESS 9680 SW 34 ST
 CITY-ST-ZIP MIAMI FL

TITLE PD Change Addition
 NAME CARBALLO, DELIA R.
 STREET ADDRESS 9680 SW 34 STREET
 CITY-ST-ZIP MIAMI, FL 33165

TITLE VSD Delete
 NAME CARBALLO, JORGE V.
 STREET ADDRESS 9680 SW 34 ST
 CITY-ST-ZIP MIAMI FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE TD Delete
 NAME CARBALLO, DELIA R.
 STREET ADDRESS 9680 SW 34 ST
 CITY-ST-ZIP MIAMI FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE V Delete
 NAME ANON, IDANIA G.
 STREET ADDRESS 9680 SW 34 ST
 CITY-ST-ZIP MIAMI FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE V Delete
 NAME CARBALLO, LILIANA Y.
 STREET ADDRESS 9680 SW 34 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
 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

[Handwritten Signature]

5/23/00

(305) 424 2222

CD0004 / 0100