

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K80612

1. Entity Name

REO SUPPLIES CORPORATION

**FILED**  
**Jul 12, 2000 8:00 am**  
**Secretary of State**

07-12-2000 90011 020 \*\*\*150.00

Principal Place of Business

10066 NW 5TH TERRACE  
MIAMI FL 33172

Mailing Address

10066 NW 5TH TERRACE  
MIAMI FL 33172

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0127830

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

REQUENA, EMILIO  
10086 NW 5 TERR  
MIAMI FL 33172

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

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 ☐ Delete  
NAME P  
STREET ADDRESS REQUENA, EMILIO  
CITY-ST-ZIP 10086 N.W. 5TH TERRACE  
MIAMI FL 33172

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

TITLE ☐ Delete  
NAME V  
STREET ADDRESS REQUENA, RICARDO  
CITY-ST-ZIP 1308 AUTUMN OAKS DR  
CHESAPEAKE VA 23320

TITLE ☒ Change ☐ Addition  
NAME V  
STREET ADDRESS RICARDO REQUENA  
CITY-ST-ZIP 2841 CHANCERY LANE  
CLEARWATER, FL. 33759

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

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:

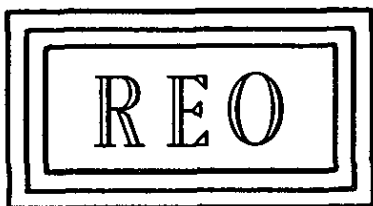
*Emilio Requena*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/6/00 (305) 267-5095  
Date Daytime Phone #

CR2E034 (5/00)

K80612

A0067460



Supplies Corporation

10086 N W 5th TERR., MIAMI, FL. 33172

305-267-5095

FAX: 305-267-3193

Miami, FL.

July 6, 2000

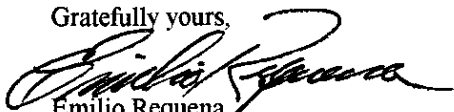
FLORIDA DEPARTMENT OF STATE  
Uniform Business Report Filings  
P. O. Box 1500  
Tallahassee, FL. 32302-1500

Attn.: Katherine Harris  
Secretary of State

Dear Ms. Harris:

I received yesterday the 2000 Uniform Business Report (Second Notice) without ever having received the first, I find being fine in \$ 400.00 for lateness. Even this fairly small amount would put a dent in my business, since my total sales last year were less than \$ 5,000.00 due to illness. I hope that considering both facts, you find in your heart to dismiss such fine.

Gratefully yours,

  
Emilio Requena  
R E O Supplies, Corp.