2000 UNIFORM BUSINESS REPORT (UBR) FILED Aug 22, 2000 8:00 am Secretary of State **DOCUMENT # L86871** A.T.X. RAY SERVICES INC. 08-22-2000 90234 007 ***150.00 Principal Place of Business Mailing Address 975 SE 2ND PLACE 975 SE 2ND PLACE APT. E APT. E A0073972 HIALEAH FL 33010 HIALEAH FL 33010 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0205322 Not Applie Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TERRERO, ANGEL Street Address (P.O. Box Number is Not Acceptable) 975 S.E. 2ND PLACE APT E HIALEAH FL 33010 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) FILE NOW!!! FEE IS \$550.00

9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min, will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition TITI F TITLE ☐ Delete NAME NAME TERRERO, ANGEL STREET ADDRESS STREET ADDRESS 975 S.E. 2ND PLACE CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL ☐ Change ☐ Delete TITLE Addition TITLE NAME TERRERO, OLGA NAME STREET ADDRESS 975 SE 2ND PLACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-74P ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS 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 OR SIGNING OFFICER OR DIRECTOR

Date

D

Attachment Doc. # L86871 ADU739172

August 2nd, 2000

TO:
DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. Box 1500
Tallahassee, Florida 32302-1500

FROM: A.T. X RAY SERVICES, INC. 975 SE 2ND PLACE APT. E Miami, Florida 33010

DOCUMENT NO. L86871 FEI NO. 65-0205322

Dear Sirs,

This letter is in reference to my 2000 UNIFORM BUSINESS REPORT (UBR).

I received a second notice of my business report stating that I had to pay \$ 550.00. I never received the first business report re-newal and when I took the report to my Accountant I was informed that I had to pay in order to re-new my Corporation.

I would like to ask you at this time if I could pay the \$ 150.00 fee, which I am enclosing because I was not aware of this matter.

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Thank you for your kind attention to this matter.

Sincerely,

ANGEL TERRERO A.T. X RAY SERVICES, INC.

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