

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M49591

1. Entity Name

INTERSERVICE, CORP.

FILED

Jan 12, 2000 8:00 am
Secretary of State

01-12-2000 90038 002 ***150.00

Principal Place of Business

7300 NW 35TH TERR
SUITE 204
MIAMI FL 33122

Mailing Address

P.O. BOX 522301
MIAMI FL 33152-2301

2. Principal Place of Business

10400 N.W. 21 STREET

3. Mailing Address

P.O. Box 226257

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number

59-2839558

Applied For

Not Applicable

Zip

33172

Country

USA

Zip

33122-6257

Country

USA

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

MARINO, ALBERTO J
7300 NW 35TH TERRACE
SUITE 204
MIAMI FL 33122

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 \$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
NAME MARINO, ALBERTO J SR
STREET ADDRESS 7300 NW 35TH TERRACE
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS 10400 N.W. 21 STREET
CITY-ST-ZIP MIAMI FL 33172 ☒ Change ☐ Addition

TITLE SD
NAME MARINO, ALBERTO J JR.
STREET ADDRESS 7300 NW 35TH TERRACE
CITY-ST-ZIP MIAMI FL 33122 ☐ Delete

TITLE
NAME
STREET ADDRESS 10400 N.W. 21 STREET
CITY-ST-ZIP MIAMI FL 33172 ☒ Change ☐ Addition

TITLE TD
NAME MARINO, IVETTE C
STREET ADDRESS 7300 NW 35TH TERRACE
CITY-ST-ZIP MIAMI FL 33122 ☐ Delete

TITLE
NAME
STREET ADDRESS 10400 N.W. 21 STREET
CITY-ST-ZIP MIAMI FL 33172 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

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

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

01/03/00 (305) 594-7100

Date

Daytime Phone #