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FILED
Aug 04, 2002 8:00 am
Secretary of State

05-24-2002 90557 008 ****61.25

5/24

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # NO1000004207

1. Entity Name

EMIRO PLUS CORPORATION

40465

Principal Place of Business

8080 PINES BLVD STE 4504
PEMBROKE PINES FL 33024

Mailing Address

8080 PINES BLVD STE 4504
PEMBROKE PINES FL 33024

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3801 S. OCEAN DR

Suite, Apt. #, etc.

11K

3. Mailing Address

18090 COLINS AVE

Suite, Apt. #, etc.

17216 17-816

City & State

HOLLYWOOD FLORIDA

City & State

SUNNY ISLES FLORIDA

6. FBI Number

65-1111810

Applied For

Not Applicable

8. Certificate of Status Desired

\$0.75 Additional

Fee Required

8. Name and Address of Current Registered Agent

SABA ROLAND G

9050 PINES BLVD STE 4504
PEMBROKE PINES FL 33024

7. Name and Address of New Registered Agent

Name SABA ROLAND G

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

3801 S. OCEAN DR # 11K

HOLLYWOOD FLORIDA

City

FL

Zip Code 33019

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 fee if applicable.

NOTE: Registered agent signature required when releasing.

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	PO	NAME	SABA, ROLAND G	☐ Delete
STREET ADDRESS	9050 PINES BLVD STE 4504			
CITY-ST-ZIP	PEMBROKE PINES FL 33024			
TITLE	SD	NAME	FRANSON, PAUL	☒ Delete
STREET ADDRESS	9050 PINES BLVD STE 4504			
CITY-ST-ZIP	PEMBROKE PINES FL 33024			
TITLE	D	NAME	FRICHETTE, LOUISE	☒ Delete
STREET ADDRESS	9050 PINES BLVD STE 4504			
CITY-ST-ZIP	PEMBROKE PINES FL 33024			
TITLE		NAME		☐ Delete
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		NAME		☐ Delete
STREET ADDRESS				
CITY-ST-ZIP				

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	NAME	SABA, ROLAND G	☒ Change ☐ Addition
STREET ADDRESS	3801 S. OCEAN DR # 11K			
CITY-ST-ZIP	HOLLYWOOD FL 33019			
TITLE		NAME		☐ Change ☐ Addition
STREET ADDRESS				
CITY-ST-ZIP				
TITLE	V	NAME	Denise LaChance DENIS	☐ Change ☒ Addition
STREET ADDRESS	3180 S. OCEAN DR # 203			
CITY-ST-ZIP	HALLANDALE FL 33009			
TITLE	D	NAME	MICHEL R. PINARD	☐ Change ☒ Addition
STREET ADDRESS	3222 CALLE LARGO DR			
CITY-ST-ZIP	HOLLYWOOD FL 33021			
TITLE		NAME		☐ Change ☐ Addition
STREET ADDRESS				
CITY-ST-ZIP				

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11; if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SABA ROLAND G
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-923 7737
 954-445-1190

Use

Daytime Phone