## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Feb 08, 2001 8:00 am Secretary of State DOCUMENT # N9500001755 1. Entity Name DADE COUNTY CERTIFIED PROCESS SERVERS ASSOCIATION 02-08-2001 90042 017 \*\*\*\*61.25 Mailing Address Principal Place of Business 1001 N. AMERICAN WAY 1001 N. AMERICAN WAY 107 MIAMI FL 33132 **MIAMI FL 33132** US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0588138 Not Applicable Country Country Zip \$8.75 Additional... Zip\_\_ 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MANN, THOMAS C 1001 N. AMERICAN WAY STE. #107 Zip Code **MIAMI FL 33132** FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be $\Box$ Department of State Trust Fund Contribution. Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition ☐ Change TITLE TITLE ☐ Delete GAGLIANI, LAURENCE NAME NAME STREET ADDRESS STREET ADDRESS 1001 N AMERICAN WAY, #107 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33132 DIRECTOR Change ☐ Addition TITLE PD ☐ Delete TITLE MANN, TC NAME MANN, T.C. 1001.N. AMERICA WAY #107 STREET ADDRESS STREET ADDRESS -1001 N. AMERICAN WAY., #107\_\_\_\_ CITY-ST-ZIP CITY-ST-ZIP MIAMI, FLA MIAMI FL 33132 DIRECTOR Change ☐ Addition **VPD** ☐ Delete TITLE PRES 1015UT/ TITLE E. ROSARIO, ADELAIDA ROSARIO, ADELAIDA NAME STREET ADDRESS 1001 N. AUGRICAL WAY H-107 STREET ADDRESS 1001 N AMERICAN WAY, #107 CITY-ST-ZIP CITY-ST-7IP **MIAMI FL 33132** Change Delete ☐ Addition TITLE TREASURES TITLE BOBES, STENEN NAME BOBEJ, STEVEN NAME 4 127 1001 N. AMERICAN WAY STREET ADDRESS STREET ADDRESS 1001 N AMERICAN WAY., #107 CITY-ST-ZIP CITY-ST-ZIP MIAMI, **MIAMI FL 33132** ☐ Change X Addition ☐ Delete TITLE TITLE NAME DELGADO, NAME 年しり 1001 N. AMERICAJ WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP