

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000006038

1. Entity Name
EXITO ESPECIAL SERV., INC.

Principal Place of Business

12530 S.W. 8TH ST.
MIAMI FL 33184

Mailing Address

12530 S.W. 8TH ST.
MIAMI FL 33184

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0975965

Applied For
Not Applicable

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

BETANCUR, NANCY
12530 S.W. 8TH ST.
MIAMI FL 33184

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. I am familiar with, and accept the obligations of registered agent.

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, 2002 Fee 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 PVD
NAME BETANCUR, NANCY
STREET ADDRESS 12530 S.W. 8TH ST.
CITY-ST-ZIP MIAMI FL 33184 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
200008518188
10/22/02--01084--004 **150.00

TITLE STD
NAME BETANCUR, ANCIJAR
STREET ADDRESS 12530 S.W. 8TH ST.
CITY-ST-ZIP MIAMI FL 33184 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
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

Date

Daytime Phone #

CR2E034 (4/02)

91 10/24/02

Attachment

Miami, 09-12-02

Division of corporations
Uniform business report filings
P.O. Box 1500
Tallahassee, fl. 32302-1500

Asunto: envio document # P00000006038
Exito Especial Serv., Inc.
12530 sw. 8 th st.
miami fl. 33184

Adjunto a la presente estamos enviando nuestro cheque Nro. *367* Del Bank of America por un valor de
ciento cincuenta dolares (\$150.00).

Este cheque se envia en la fecha , por razon de que el primer informe anual no fue recibido por nuestra
corporacion.

Agradecemos la atencion a la presente y nos suscribimos cordialmente.

Nancy Betancur
Presidente.

Nancy Betancur
C.C. folder
Contabilidad.