

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000007397

1. Entity Name  
AEDA, Inc.

Principal Place of Business Mailing Address  
229 SE Park St. 229 SE Park St.  
Dania Beach, FL 33004 Dania Beach, FL 33004

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 ☒ Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

Portilla, Antonio  
229 SE Park St.  
Dania Beach, FL 33004

## 7. Name and Address of New Registered Agent

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 Antonio Portilla DATE 11-20-01  
(NOTE: Registered Agent signature required when reappointing)

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, 2001 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 another like empowered.

SIGNATURE: Antonio Portilla, President DATE: 11-20-01  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

01 DEC 10 PM 4:00

000004740420--7  
-12/27/01--01010--009  
\*\*\*\*150.00 \*\*\*\*150.00

CR2E034 (10/00)



## Joel Friend & Associates, Inc.

3880 Sheridan St. • Hollywood, FL 33021 • [www.joelfriend.com](http://www.joelfriend.com)

November 14, 2001

Reinstatement Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: AEDA, Inc.  
Charter# P00000007397

To Whom It May Concern:

On behalf of the taxpayer, I respectfully request that the State of Florida abate the reinstatement fees associated with this late filing. The taxpayer did not received notice of AEDA, Inc.'s Profit Corporation Annual Report filing requirement. My client informed me that he has no recollection of any prior notification regarding this annual filing. Now that the taxpayer is aware of this annual filing the taxpayer will most certainly file this report on a timely basis.

Enclosed you will find the taxpayer's payment of \$150.00 for AEDA, Inc.'s 2001 Annual Report. Under these circumstances, I once again respectfully request that you abate any reinstatement fees. My client fully intends to keep this corporation active. If you should have any questions please contact me directly. I would like to thank you in advance for your attention to this matter.

Very truly yours,

Joel Friend  
Joel Friend & Associates, Inc.