

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2001 8:00 am
Secretary of State
 04-23-2001 90127 009 ***150.00

0232302

DOCUMENT # P00000020990

1. Entity Name
PAL CONSULTING, INC.

Principal Place of Business

**5912 S.W. 133RD COURT
 MIAMI FL 33183**

Mailing Address

**5912 S.W. 133RD COURT
 MIAMI FL 33183**

2. Principal Place of Business

8495 NW 169 TERR

3. Mailing Address

8495 NW 169 TERR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

MIAMI LAKES, FL

City & State

MIAMI LAKES, FL

4. FEI Number

65-0985329

Applied For

Not Applicable

Zip

33016

Country

DADE

Zip

33016

Country

DADE

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**LABRADA, PERCY A
 5912 S.W. 133RD COURT
 MIAMI FL 33183**

7. Name and Address of New Registered Agent

LABRADA, PERCY A

8495 NW 169 TERR.

MIAMI LAKES

FL

Zip Code 33016

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 **PERCY A. LABRADA, PRESIDENT**

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, 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 **P** ☐ Delete
 NAME **LABRADA, PERCY A**
 STREET ADDRESS **5912 S.W. 133RD COURT**
 CITY-ST-ZIP **MIAMI FL 33183**

TITLE **V** ☐ Delete
 NAME **LABRADA, ILEANA M**
 STREET ADDRESS **5912 S.W. 133RD COURT**
 CITY-ST-ZIP **MIAMI FL 33183**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
 NAME **LABRADA, PERCY A**
 STREET ADDRESS **8495 NW 169 TERR**
 CITY-ST-ZIP **MIAMI LAKES, FL 33016**

TITLE **P** ☒ Change ☐ Addition
 NAME **LABRADA, PERCY A**
 STREET ADDRESS **8495 NW 169 TERR**
 CITY-ST-ZIP **MIAMI LAKES, FL 33016**

TITLE **V** ☒ Change ☐ Addition
 NAME **LABRADA, ILEANA M**
 STREET ADDRESS **8495 NW 169 TERR**
 CITY-ST-ZIP **MIAMI LAKES, FL 33016**

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

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

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

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

PERCY A. LABRADA
PRESIDENT

Date

Daytime Phone #

4/14/2001

(305) 742-

0135

CR2E034 (10/00)