

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000022836

1. Entity Name

CASTELLANOS WOOD WORK, INC.

1. **FILED**  
Mar 01, 2001 8:00 am  
Secretary of State

01-29-2001 90136 049 \*\*\*150.00

Principal Place of Business

Mailing Address

4535 SW 75 AVE

4535 SW 75 AVE

MIAMI FL 33155

MIAMI FL 33155

4321 SW 75 AVE

4321 SW 75 AVE

MIAMI, FL 33155

MIAMI, FL 33155

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

65-0988987

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASTELLANOS, PEDRO J JR.

4535 SW 75 AVE 4321 SW 75 AVE

MIAMI FL 33155

MIAMI, FL 33155

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

Pedro Castellanos J JR VD

01-15-01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signatures 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 NAME ☐ Delete

PD CASTELLANOS, PEDRO

STREET ADDRESS 3888 NW 2 ST.

CITY-ST-ZIP MIAMI FL 33126

TITLE NAME ☐ Delete

VD CASTELLANOS, PEDRO J JR.

STREET ADDRESS 3888 NW 2 ST.

CITY-ST-ZIP MIAMI FL 33126

TITLE NAME ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ 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: x

Pedro Castellanos J JR VD 1/15/01 (305)267-3323

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)