2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000042986

1. Entity Name

FIRE COMPANY, INC

Principal Place of Business	Mailing Address
1351 NE MIAMI GARDS DR #1646 N. MIAMI BEACH-FL 33060	PO BOX 693995-MIAMI FL-33269-3995

FILED
03 NOV -7 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1004298 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DE OLIVEIRA, JOSE E.
1351 NE MIAMI GARDS DR #1646
N. MIAMI BEACH-FL 33060

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 [signature] 10/29/03

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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD JOSE E. DE OLIVEIRA PO BOX 693995-MIAMI-FL-33269 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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11/07/03--01085--008 **150.00

CR2E034 (11/00)

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] 10/29/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

October 29, 2003

Division of Corporations
P. O. BOX 1500
Tallahassee, FL 32302

RE: Fire Company, Inc.

Dear Sir/ Madam:

As instructed by one of the division's agent, I am sending this letter to explain the reason for waiving the late fee. Our office has not received the annual report mailed by your office to renew the corporation mentioned above. Please note our address in your records to confirm that it is correct. We have enclosed a check for $ 150.00 for the year of 2003.

I kindly ask of you to waive the current penalties pending on the corporation. Should you have any questions regarding the foregoing, please contact the undersigned.

Sincerely,

Jose E. De Oliveira
President

FIRE COMPANY, INC.
PO BOX 693995
MIAMI, FL 33269-3995