

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 04, 2002 8:00 am
Secretary of State

03-04-2002 90035 013 ***150.00

DOCUMENT # P00000054465

1. Entity Name

BORDAMAR ENTERPRISES, CORPORATION

Principal Place of Business

881 N.W. 85TH TERRACE
SUITE 1616
PLANTATION FL 33324

Mailing Address

881 N.W. 85TH TERRACE
SUITE 1616
PLANTATION FL 33324

2. Principal Place of Business

16180 South Post Rd
Suite, Apt. #, etc.
302

3. Mailing Address

16180 South Post Rd
Suite, Apt. #, etc.
302

City & State
Weston FL 33331

City & State
Weston Florida

Zip
33331

Country
USA

Zip
33331

Country
USA

4. FEI Number

65-1014069

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BORDA, JAIME A JR.
881 N.W. 85TH TERRACE
SUITE 1616
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name
JAIME BORDA

Street Address (P.O. Box Number is Not Acceptable)
16180 South Post Rd

#302

City
Weston FL

FL

Zip Code
33331

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, 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, 2002 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
PD
BORDA, JAIME A
881 N.W. 85TH TERRACE SUITE 1616
PLANTATION FL 33324

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
DE BORDA, LUCY CALDAS
881 N.W. 85TH TERRACE SUITE 1616
PLANTATION FL 33324

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
BORDA, JAIME A JR.
881 N.W. 85TH TERRACE SUITE 1616
PLANTATION FL 33324

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
BORDA, JAIME A
16180 South Post Rd #302
Weston FL 33331

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
DE BORDA, LUCY CALDAS
16180 South Post Rd #302
Weston FL 33331

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
JAIME A BORDA
16180 South Post Rd #302
Weston FL 33331

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

JAIME BORDA JR

Date

(954) 2172509

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)