

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000055366

1. Entity Name  
PINO KAOBA & ASSOCIATES, INC.

**FILED**  
**Mar 12, 2001 8:00 am**  
**Secretary of State**

03-12-2001 90018 016 \*\*\*158.75

Principal Place of Business

13360 SW 25 ST  
MIAMI FL 33175

Mailing Address

13360 SW 25 ST  
MIAMI FL 33175

2. Principal Place of Business

1356 SW 8th St  
Suite, Apt. #, etc.  
202

3. Mailing Address

1356 SW 8th St  
Suite, Apt. #, etc.  
202



DO NOT WRITE IN THIS SPACE

City & State  
MIAMI, FLA

Zip  
33135

Country

City & State  
MIAMI, FLA

Zip  
33135

Country

4. FEI Number  
65-1010097

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PINO, PATRICIA H  
13360 SW 25 ST  
MIAMI FL 33175

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 Patricia H Pino, President  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

1/10/01  
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 ☐ Delete  
NAME D  
STREET ADDRESS PINO, PATRICIA H  
CITY-ST-ZIP 13360 SW 25 ST  
MIAMI FL 33175

TITLE ☒ Change ☐ Addition  
NAME PINO, PATRICIA H  
STREET ADDRESS 1356 S.W 8th St Suite 202  
CITY-ST-ZIP Miami, FLA 33135

TITLE ☐ Delete  
NAME D  
STREET ADDRESS PINO, ERNESTO R  
CITY-ST-ZIP 13360 SW 25 ST  
MIAMI FL 33175

TITLE ☒ Change ☐ Addition  
NAME PINO, ERNESTO R  
STREET ADDRESS 1356 S.W 8th St Suite 202  
CITY-ST-ZIP Miami, FLA 33135

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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: Patricia H Pino  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)