

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 17, 2001 8:00 am
Secretary of State

07-17-2001 90001 027 ***150.00

DOCUMENT # **P000000055730**

1. Entity Name

COLA'S Drywall Inc

Principal Place of Business

Mailing Address

1000 Southwest 76 Ave. #3
N. Lauderdale FL 33061

LA

A0077468

2. Principal Place of Business

3. Mailing Address

1000 SW 76 Ave #3

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

N. Lauderdale FL

33061

Country

Zip

Country

4. FEI Number

65-1015427

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

Alicia Del Carmen Campos
1000 S.W. 76 Ave #3
N. Lauderdale FL 33061

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

Alicia Del Carmen Campos

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, 2000 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	<input type="checkbox"/> Delete
NAME	Alicia Del Carmen Campos
STREET ADDRESS	1000 SW 76 Ave #3
CITY-ST-ZIP	N. Lauderdale FL 33061
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
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TITLE	<input type="checkbox"/> Delete
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:

Alicia Del Carmen Campos

Attachment
DH# M70309
A007468

July 10, 2011

Dear Sir/Madam:

~~My name is Alicia del Carmen Campos~~
owner of LOCA's Drywall Inc
w. In Fed ID# 65-1015427.

The reason of writing is because

I did not receive the annual
Report form. I was not
aware of this requirement
my Accountant just told me.
my corporation was inactive.

Sincerely
Alicia Del Carmen Campos