

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000070713

1. Entity Name
AGLO, INC.

FILED
Mar 27, 2001 8:00 am
Secretary of State

03-27-2001 90012 047 ***150.00

Principal Place of Business

8471 S.W. 21ST STREET
MIAMI FL 33155

Mailing Address

8471 S.W. 21ST STREET
MIAMI FL 33155

2. Principal Place of Business

10125 N.W. 116th WAY

3. Mailing Address

P.O. BOX 526521

Suite, Apt. #, etc.

SUITE 16

Suite, Apt. #, etc.

City & State

MIAMI FLORIDA

City & State

MIAMI FLORIDA

4. FEI Number

65-1026391

Applied For

Not Applicable

Zip

33178

Country

Zip

33152-6521

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MONTESANO, JORGE L
8471 S.W. 21ST STREET
MIAMI FL 33155

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, 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PTD
MONTESANO, JORGE L
8471 SW 21ST STREET
MIAMI FL 33155

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SVD
MONTESANO, DAISY
8471 SW 21ST STREET
MIAMI FL 33155

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ 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: **JORGE L. MONTESANO**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-888-1821

Date

Daytime Phone #

CR2E034 (10/00)