

FD-2002 UNIFORM BUSINESS REPORT (UBR)

1082

DOCUMENT # **P00000071349**
 1. Entity Name **DANNY FINISH, INC.**

Principal Place of Business **450 N.W. 59 CT. MIAMI, FL. 33126**
 Mailing Address **450 N.W. 59 CT. MIAMI, FL 33126**

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

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

FILED
02 MAY 31 PM 1:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
700005763917--4
06/12/02--01077-022
DO NOT WRITE IN THESE SPACES \$158.75
 4. FEI Number **65-1026845** Applied For ☐ Not Applicable ☒
 5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
DANIEL BARREIRO
450 N.W. 59 CT.
MIAMI, FL. 33126

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 _____ (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
ARAR MAYA: 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	DP DANIEL BARREIRO 450 N.W. 59 CT. MIAMI, FL. 33126	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5/3/01 90977 033 150-00
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> 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: **DANIEL BARREIRO** **5/2/02 (305) 336-8242**

J.R. FERREIRO, JR., P.A.

Certified Public Accountant

7911 N.W. 72 Avenue, Suite 223-A

Medley, Florida 33166

Tel.: (786) 337-6918 Fax: (786) 337-6319

May 24, 2002

**Florida Department of State
Uniform Business Report
409 East Gaines Street
Tallahassee, FL 32399**

RE: Danny Finish, Inc., Doc# P00000071349.


Dear Sirs:

Enclosed are 2002 Uniform Business Report for the above referred to taxpayer, check no. 1695 in the amount of \$158.75, covering the 2002 UBR and a certificate of status report Also, copy of taxpayer's check # 1193 in the amount of \$ 150.00 for payment of the 2001-UBR.

Mr. Barreiro did not received a copy of the annual report for either 2001 and 2002, please waived all penalties on this matter.

If you required any other information please, do not hesitate to contact this office at 786-337-6918.

Thank You,



Isabel V. Ferreiro