## **2001 UNIFORM BUSINESS REPORT (UBR)** May 03, 2001 8:00 am Secretary of State DOCUMENT # P0000083808 NAVAS LIMO SERVICE INC. 05-03-2001 91149 009 \*\*\*158.75 Principal Place of Business Mailing Address 2000 E. COMMERCIAL BLVD., SUITE 208 2800 E. COMMERCIAL BUVD.. SUITE 208 FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33306 2. Principal Place of Business 3. Mailing Address AUE # F-106 SE 2 40 40 F. 106 770 DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 65-1042943 DEERFIELD DEERFIELD Not Applicable \$8.75 Additional 5. Certificate of Status Desired 3 344*1* BROWARD KnowAND Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ALLEN H. KATZ PA Street Address (P.O. Box Number is Not Acceptable 2800 E. COMMERCIAL BLVD., SUITE 208 FT. LAUDERDALE FL 33308 770 SE 2ND AUE DEENFIELD tement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named en JORGE A. NAVAS SIGNATURE 💆 of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. JORGE A. NAVAS ☐ Delete TITI F TITLE 770 SE ZND AVE # F-106 NAME NAME STREET ADDRESS STREET ADDRESS DEERFIELD BEACH, FL 33441 CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition TIT) F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP-Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP -CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of the executer 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 w all other like empowered. JONEE A. NAVAS /PRESIDENT 04/25/N SIGNATURE: