

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 28, 2002 8:00 am
Secretary of State

07-28-2002 90173 007 ***150.00

DOCUMENT # P00000087834

1. Entity Name
VIDAL MANAGEMENT COMPANY, INC.

Principal Place of Business

8929 NW 53 MANOR
 CORAL SPRINGS FL 33067

Mailing Address

8929 NW 53 MANOR
 CORAL SPRINGS FL 33067

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-1046964

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

VIDAL, CARLOS A
8929 NW 53 MANOR
CORAL SPRINGS FL 33067

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 ☐ Delete
 NAME **PD**
 STREET ADDRESS **VIDAL, CARLOS A**
 CITY-ST-ZIP **8929 NW 53 MANOR**
CORAL SPRINGS FL 33067

TITLE ☐ Delete
 NAME **VSTD**
 STREET ADDRESS **VIDAL, ROSA B**
 CITY-ST-ZIP **8929 NW 53 MANOR**
CORAL SPRINGS FL 33067

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

TITLE ☐ Change ☐ Addition
 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: _____

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07-23-02 (954)3405702

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

#00000087834/675394

VIDAL MANAGEMENT COMPANY, INC
TAMMY BROOKS APARTMENTS
8929 NW 53 MANOR
CORAL SPRINGS, FL 30067

July 23, 2002

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

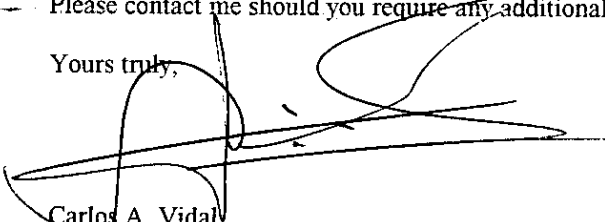
Attached is copy of VIDAL MANGEMENT COMPANY, INC.'s year 2002 Uniform Business Report, completed and mailed on April 27, 2002. Also, attached is copy of check for the \$150.00 fee that was mailed with the UBR. Please, note that at that time we had not received your pre-printed addressed form, so we completed a blank form that we had from the previous year with all the pertinent information. As of this date, we have yet to receive the cancelled/paid check from the bank. We can only assume that it was misplaced or lost in the mail. We now know that you did not receive it, as we have received your late/delinquency notice/report. We, respectfully request that you waive the late fee, as we originally completed and mailed the form timely.

We are sending a new check for \$150.00 with the copy of the UBR as filed on April 26, 2002 attached to the new report received early last week.

Please acknowledge as soon as possible the receipt of this communication and advise as to the waiver of the late penalties for the reason given above.

Please contact me should you require any additional information.

Yours truly,


Carlos A. Vidal
President

VIDAL MANAGEMENT COMPANY, INC.

63-8655 66
2660

04-27-02

32.06

#P.L.
thirty two and $\frac{06}{100}$ ct.

32.06

citibank

CITIBANK F.S.B. BR. #66
2769 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065

AC # 87822-15191

⑈001298⑈ ⑈266086554⑈

~~NOT NEGOTIABLE~~

3200539667⑈

1299

63-8655 66
2660

04-27-02

150

Department of State
one hundred fifty and $\frac{00}{100}$ ct.

citibank

CITIBANK F.S.B. BR. #66
2769 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065

Doc # P00000087834

⑈001299⑈ ⑈266086554⑈

~~NOT NEGOTIABLE~~

3200539667⑈

Attachment

#P00000087834/675394

63-8655 66
2660

04-27-02

Broward County Health Department
Seventy five and $\frac{00}{100}$ ct.

citibank

CITIBANK F.S.B. BR. #66
2769 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065

#06-60-03788

⑈001300⑈ ⑈266086554⑈

~~NOT NEGOTIABLE~~

3200539667⑈

510835