


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 08, 2003 8:00 am
Secretary of State

08-25-2003 90095 001 ***150.00

8/24

DOCUMENT # P00000099306 

1. Entity Name
ONLY SIGNS INC

DO NOT WRITE IN THIS SPACE

55056069

2. Principal Place of Business <u>6991 N.W. 82 AVE</u>		3. Mailing Address <u>6991 N.W. 82 AVE</u>	
Suite, Apt. #, etc. <u>6</u>		Suite, Apt. #, etc. <u>6</u>	
City & State <u>MIAMI, FL</u>		City & State <u>MIAMI, FL</u>	
Zip <u>33166</u>	Country <u>USA</u>	Zip <u>33166</u>	Country <u>USA</u>

DO NOT WRITE IN THIS SPACE

4. FEI Number <u>65-1055783</u>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

7. Name and Address of Current Registered Agent

ANTHONY J. SCORPION

Street Address (P.O. Box Number is Not Acceptable)
31 N.E. 26 ST

City MIAMI FL Zip Code 33137

**DO NOT WRITE
IN THIS SPACE**

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 re-stating)

DATE _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$81.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>DPV</u> <u>ESTEVEZ, MIGUEL E.</u> <u>6991 N.W. 82 AVE #6</u> <u>MIAMI</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>ST</u> <u>ESTEVEZ, MIGUEL E</u> <u>6991 N.W. 82 AVE #6</u> <u>MIAMI, FL 33166</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Miguel E. Estevez 8-21-03 305-477-7446

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ Date _____ Daytime Phone # _____

MIGUEL E. ESTEVEZ

CR2004B (12/02)

Attachment

550510009

PO00000099300

ONLY SIGNS INC.

6991 N.W. 82 Ave. # 6
Miami, Fl. 33166
305 477 7446
Fax: 305 477 7700

To: Whom it may concern
From: ONLY SIGNS INC.
Date: August 21, 2003
Re: 2003 (UBR) Report

Hello:

This is to inform you that I (ONLY SIGNS) did not received the (UBR) Report for 2003

Would you please remove the \$400.00 late fee.

I am sending you, the \$150.00 check, along with this letter an a (UBR) downloaded from

The Net, as advice by one of your Associates

Thanking you in advance

ONLY SIGNS INC.

Miguel E. Estevez

Miguel E. Estevez PRESIDENT