## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

## Sep 06, 2001 8:00 am Secretary of State P00000103532 DOCUMENT # 1. Entity Name 09-06-2001 90263 019 \*\*\*150.00 AMERICAN V.I.P. SERVICE, INC. Principal Place of Business Mailing Address 5728 MAJOR BLVD., SUITE 213 5728 MAJOR BLVD.. SUITE 213 ORLANDO FL 32819-7910 ORLANDO FL 32819-7910 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3700979 Not Applicable Zip~ ^ Country Country \$8.75: Additional \_\_\_\_ 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ALMEIDA, RICARDO B Street Address (P.O. Box Number is Not Acceptable) 2000 BRIDGEVIEW CIR. ORLANDO FL 32824-5608 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) FILE NOW!!! FEE IS \$550.00 • 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Addition TITLE ROGERIO RIBIERO DOS SANTOMS TITLE ☐ Change 5728 MAJOR BLVD. SUITE 213 NAME NAME ORLANDO, FL 32819-7910 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition V P RICARDO B. ALMEIDA NAME NAME 2000 BRIDGEVIEW CIRCLE STREET ADDRESS STREET ADDRESS ORLANDO, FL 32824-5608 .CITY-ST-ZIP\_ CITY\_ST\_ZIP\_ TITLE ☐ Delete TITLE ☐ Change Addition S RICARDO B. ALMEIDA NAME NAME 2000 BRIDGEVIEW CIRCLE STREET ADDRESS STREET ADDRESS ORLANDO, FL232824-5608 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition | NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 tripe 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 employered 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 all

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #



July 18, 2001

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

> Re: American V.I.P. Service, Inc. Doc No. P00000103532 Form UBR – 2001 Fed. EIN: 59-

Enclosed is Form UBR for 2001, together with a check in the amount of \$ 150.

The registered agent, who handles these type matters, did not receive the original form.

This Company was formed on November 2, 2000. The RA is from Brazil and lives in the U.S. He is new to required filing, but is gradually learning. The principals of this new company are dutifully trying to comply with all federal, state and local government requirements.

We respectfully request the late filing penalty be waived in this instance.

Sincerely yours,

Jerry L. Rogers, CPA

JLR: rll

**Enclosures** 

C: Ricardo B. Almeida