

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000104487

1. Entity Name
NORTH-DADE RENTALS, INC.



FILED

03 SEP 26 PM 1:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
~~7385 W. 14 AVE.~~
HALEAH FL 33014

Mailing Address
~~7385 W. 14 AVE.~~
HALEAH FL 33014

3781 WILFAVE
HALEAH, FL 33012



2. Principal Place of Business
3781 WILFAVE
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
HALEAH, FL

City & State
SAME

4. FEI Number 65-1059506

Applied For
Not Applicable

Zip 33012 Country USA

Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SLEIMAN, JUAN C
~~7385 W. 14 AVE.~~
~~HALEAH FL 33014~~
3781 WILFAVE
HALEAH, FL 33012

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 renewing) DATE _____

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME SLEIMAN, JUAN C
STREET ADDRESS 7385 W. 14 AVE
CITY-ST-ZIP HALEAH FL 33014
3781 WILFAVE
HALEAH, FL 33012

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME SLEIMAN, ISABEL
STREET ADDRESS 7385 W. 14 AVE
CITY-ST-ZIP HALEAH FL 33014
SAME

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
000023369070
09/26/03--01070--015 **150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: _____ SIGNATURE REQUIRED

Date Daytime Phone #

CR2034 (4/03)

2/9/25

Attachment 80148358

North-Dade Rentals Inc.

3781 West 18th Ave
Hialeah, FL 33012
Office 305-558-8101-
Fax 305-558-4968

September 11, 2003

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Dear Sir or Madam:

Please be advised I never received the UBR due to the fact our office had moved to a new location.

The report was hand delivered to me 9/10/2003 by the new tenant at the old address.

I spoke with your office on 9/11/2003 and the person that answered the call advised me to make this letter and send it in with a check in the amount of \$150.00

Doc # P00000104487

Sincerely,


Juan C. Steiman
President