

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 16, 2003 8:00 am**  
**Secretary of State**

0413472 AV

04-16-2003 90202 019 \*\*\*150.00

**DOCUMENT # P00000111813**

1. Entity Name  
**ORLANDO ARAUJO SERVICES, INC.**



Principal Place of Business  
**305 FREEDOM COURT  
DEERFIELD BEACH FL 33442**

Mailing Address  
**305 FREEDOM COURT  
DEERFIELD BEACH FL 33442**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1059459**

Applied For  
Not Applicable

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

**— ARAUJO, ORLANDO  
305 FREEDOM COURT  
DEERFIELD BEACH FL 33442**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**D ARAUJO, ORLANDO  
305 FREEDOM COURT  
DEERFIELD BEACH FL 33442**

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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 Block 11 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

**02. 01. 03.**

Date

**954.420.1047**

Daytime Phone #

CR2E034 (10/02)

Attachment

70042132  
P00000111813

FLORIDA DEPARTMENT OF STATE  
Division of Corporation  
2003 Uniform Business Report (UBR)  
409 East Gaines Street  
Tallahassee, FL 32399

Re: ~~Filing of Uniform Business Report 2002 / 2003~~

P00000111813

ORLANDO ARAUJO SERVICES, INC.

To Whom It May Concern:

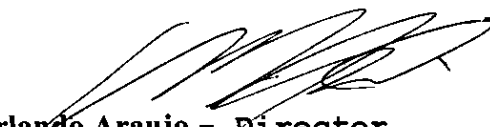
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This letter is to inform you that we have received a Uniform Business Report form in the mail and for the second time with the FEIN printed wrong on those forms.

Please make the correct change. The correct number shall be 65-1059459.

Any questions or concern, feel free to contact our accountant at (954) 725-4600 and speak to Mr. Breno Gomes.

Sincerely,



Orlando Araujo - Director  
ORLANDO ARAUJO SERVICES, INC.  
305 Freedom Court  
Pompano Beach, FL 33442