

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

0281212 AV

DOCUMENT # P00000116933

1. Entity Name

JOHN ACEBAL BOBCAT RENTAL, INC.

03-05-2002 90084 050 ***150.00

Principal Place of Business

**11023 SOUTHWEST 88TH STREET
 SUITE M-104
 MIAMI FL 33176**

Mailing Address

**11023 SOUTHWEST 88TH STREET
 SUITE M-104
 MIAMI FL 33176**



2. Principal Place of Business
11023 SW 88th # M-104

3. Mailing Address
11023 SW 88th # M-104

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Apt M-104

M-104

City & State

City & State

Miami FLA

Miami FL

4. FEI Number

650508639

Applied For

Not Applicable

Zip

Country

Zip

Country

33176

USA

33176

USA

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

**SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(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 \$150.00
After May 1, 2002 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PSTD
 ACEBAL, JOHN E
 11023 SOUTHWEST 88TH STREET
 MIAMI FL 33176** ☐ Delete

TITLE
 NAME
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☐ Change ☐ Addition

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☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

John E. Acebal **2/16/2002** **305-366-8780**

CR2E034 (9/01)