

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000057674

1. Entity Name

I & I UNLIMITED SERVICES, CORP.



FILED

03 SEP 10 AM 11:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

9725 SW 182 ST

3. Mailing Address

14410 SW 112 TERR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-0998339

Applied For

Not Applicable

Zip

33157

Country

USA

Zip

33186

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

ISABEL SANCHEZ

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

9025 SW 182 ST

City

MIAMI

FL

Zip Code

33157

**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

*Isabel Sanchez*

7/29/03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$180.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 PST ☒ DELETE  
NAME ISABEL SANCHEZ  
STREET ADDRESS 9725 SW 182 ST  
CITY-ST-ZIP MIAMI, FL 33157

TITLE PST  
NAME ISRAEL SANCHEZ  
STREET ADDRESS 14410 SW 112 TERR  
CITY-ST-ZIP MIAMI, FL 33186

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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 duly empowered.

SIGNATURE:

*Isabel Sanchez*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/29/03

(305) 387-7105

Date

Daytime Phone #

CR2E034B (12/02)

June 09,2003

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
P.O.BOX 6327  
Tallahassee, Florida, 32314

Ref: I & I UNLIMITED SERVICES,CORP.

2003 UBR for Profit Corporation.

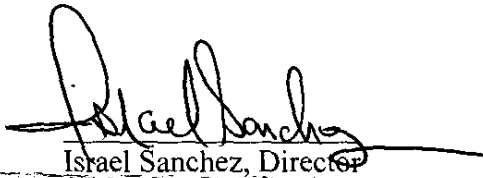
2004

We never got the 2003 Form annual report/uniform business from you.

So for the same reason We are sending you the payment of \$150.00.

We hope understand our situation.

Sincerely yours,



Israel Sanchez, Director