

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90430 047 ***150.00

DOCUMENT # P01000082430

1. Entity Name

SANTPALT REMODELING, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1417 N. 59 TERR

Suite, Apt. #, etc.

3. Mailing Address

1501 SW 16 AVE

Suite, Apt. #, etc.

City & State

HOLLYWOOD FL

City & State

MIAMI FL

4. FEI Number

65-1133828

Applied For

Not Applicable

Zip

Country

33021

USA

Zip

Country

33145

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JESUS SANDOVAL

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

1417 N. 59 TERRACE

City

HOLLYWOOD

FL

Zip Code

33021

**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.

SIGNATURE

X Jesus Sandoval

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

JESUS SANDOVAL, PRES.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/8/02

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE P/V/P/T/S/D
NAME JESUS SANDOVAL
STREET ADDRESS 1417 N. 59 TERRACE
CITY-ST-ZIP HOLLYWOOD FL 33021

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

X Jesus Sandoval

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/8/02

Daytime Phone #

CR2E034B (12/01)