

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 02, 2003 8:00 am**  
**Secretary of State**

05-02-2003 90084 012 \*\*\*150.00

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**DOCUMENT # P01000082430**

1. Entity Name  
**SANTPALT REMODELING INC.**



Principal Place of Business  
**1417 N 59 TERR  
HOLLYWOOD FL 33021**

Mailing Address  
**1501 SW 16 AVE  
MIAMI FL 33145**



2. Principal Place of Business

**4313 SW 49 ST.**

3. Mailing Address

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

**FT. LAUDERDALE, FL**

City & State

4. FEI Number **65-1133828**

Applied For

Not Applicable

Zip

**33314**

Country

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

**SANDOVAL, JESUS  
1417 N 59 TERR  
HOLLYWOOD FL 33021**

Name

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

**4313 SW 49 ST.**

City

**FT. LAUDERDALE**

FL

Zip Code

**33314**

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

*Jesus Sandoval*

**JESUS SANDOVAL, PRES. 4/25/03**

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 **PVTS** ☐ Delete  
NAME **SANDOVAL, JESUS**  
STREET ADDRESS **1417 N 59 TERR**  
CITY-ST-ZIP **HOLLYWOOD FL 33021**

TITLE ☐ Change ☐ Addition  
NAME **4313 SW 49 ST.**  
STREET ADDRESS **FT. LAUDERDALE FL**  
CITY-ST-ZIP **33314**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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:

*Jesus Sandoval* **JESUS SANDOVAL 4/25/03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)