

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 16, 2002 8:00 am**  
**Secretary of State**

09-16-2002 90111 033 \*\*\*150.00

**DOCUMENT # P01000107669**

1. Entity Name  
**BY ANGEL, INC.**

Principal Place of Business  
**8060 NORTH COLONY CIRCLE**  
**SUITE 106**  
**TAMARAC FL 33321**

Mailing Address  
**8060 NORTH COLONY CIRCLE**  
**SUITE 106**  
**TAMARAC FL 33321**

2. Principal Place of Business  
**9665 SE 121<sup>st</sup> PLACE**  
 Suite, Apt. #, etc.

3. Mailing Address  
**9665 SE 121<sup>st</sup> PLACE**  
 Suite, Apt. #, etc.

City & State  
**Bellevue, FL**  
 Zip  
**34420**

Country  
**MARION**

City & State  
**Bellevue, FL**  
 Zip  
**34420**

Country  
**MARION**

4. FEI Number  
**65-1150914**

Applied For  
☒ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

## 6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.**  
**1840 SW 22ND ST.**  
**4TH FLOOR**  
**MIAMI FL 33145**

## 7. Name and Address of New Registered Agent

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. 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

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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

TITLE  
**PSTD**  
 NAME  
**DE JESUS, ANGEL**  
 STREET ADDRESS  
**8060 NORTH COLONY CIRCLE SUITE 106**  
 CITY-ST-ZIP  
**TAMARAC FL 33321**

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ 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 REQUIRED**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**9-11-02**

**9544152511**

Date

Daytime Phone #

CR2E034 (4/02)

To Whom it may concern,

Spt 11, 02  
Attachment  
R# PD1000107469

I did not receive my Uniform <sup>872068</sup>

Business Report until July. In that case my  
filing was going to be late. The reason it  
may have arrived late is because I no longer  
reside at 8060 N. Colony Circle, Tamarac. <sup>33321</sup> I now  
reside at 9665 SE 121<sup>st</sup> Place, Belleview 34420.  
Please except my filing fee for May, due to  
the very late mail.

Thank You,  
Angel Ojeda