

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **PO1000119017**

1. Entity Name

AIMS Communications, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 OCT 22 PM 1:46

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

16300 NE 19 AVE

3. Mailing Address

Suite, Apt. #, etc.

242

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

4. FEI Number

26-0041706

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

Zip

33162

Country

USA

Zip

Country

7. Name and Address of Current Registered Agent

Name

Carmen Ramos

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

16612 N Miami Ave

City

MIAMI

FL

33169

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

Carmen Ramos

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

(NOTE: Registered Agent signature required when renewing)

10-18-2002

DATE

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	President
NAME	George Maldonado
STREET ADDRESS	10642 NW 1st
CITY - ST - ZIP	Plantation, FL 33324
TITLE	Secretary - Treasurer
NAME	Irma Maldonado
STREET ADDRESS	10642 NW 1st
CITY - ST - ZIP	Plantation, FL 33324
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**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 powers.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Irma Maldonado

10/18/02

(305)949-5388

Daytime Phone #

CR2E034B (12/01)

16300 NE 19th Avenue
Suite # 242
Miami, FL 33162
Tel. (305) 949-5388
Fax. (305) 949-7798

AIMS Communications, Inc

October 21, 2002

Department of State
409 E. Gaines Street
Tallahassee, FL 32399

Dear Sir or Madam:

I Irma Maldonado never received the 2002 UBR for AIMS Communications. Attached I downloaded the form from the website and I filled in the information needed and I enclosed the \$150.00 fee. Please do not charge me any penalty since I never received the original.

Sincerely,



Irma Maldonado
Secretary / Treasurer

