

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State

05-19-2002 90242 019 ***150.00

DOCUMENT # P01000122397

1. Entity Name
AMIGOS HOME INVESTORS, INC.

Principal Place of Business
8304 LASERENA DR.
TAMPA FL 33614

Mailing Address
8304 LASERENA DR.
TAMPA FL 33614

2. Principal Place of Business
2319 W. Kentucky Ave
 Suite, Apt. #, etc.

3. Mailing Address
2319 W. Kentucky Ave
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Tampa, FL
Zip **33607** **Country** **USA**

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Tampa, FL
Zip **33607** **Country** **USA**

4. FEI Number ☒ **Applied For**
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

FUENTES, LAWRENCE F ESQ
FUENTES AND KREISCHER, P.A.
1407 W. BUSCH BLVD.
TAMPA FL 33612

7. Name and Address of New Registered Agent

Name **LARRY FRISCO**
Street Address (P.O. Box Number is Not Acceptable)
2319 W. Kentucky Ave
City **Tampa** **FL** **Zip Code** **33607**

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 **LARRY FRISCO** *Larry Frisco Vice President* **4/10/02**
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 \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	JORGE A. GARCIA	
STREET ADDRESS	4930 HI VISTA CIRCLE	
CITY-ST-ZIP	TAMPA FL 33625	
TITLE	✓	<input type="checkbox"/> Delete
NAME	LARRY FRISCO	
STREET ADDRESS	8304 LASERENA DR	
CITY-ST-ZIP	TAMPA FL 33614	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 Book 11 or Book 224 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE **LARRY FRISCO** *Larry Frisco Vice President* **4-10-02**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)