

2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2003 8:00 am
Secretary of State

05-19-2003 90212 022 ***150.00

DOCUMENT # **PO2000026927**

1. Entity Name

ULTIMATE STAMP CONCRETE INC

Principal Place of Business

Mailing Address

5181 N.W. 2 ST
MIAMI, FL 33126

90136628

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

01-0641185

Applied For

Not Applicable

Zip

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

Rafino D. Obando
5181 N.W. 2 ST
MIAMI, FL 33126

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.

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) ☐

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRO** ☐ Delete
 NAME **Rafino D OBANDO**
 STREET ADDRESS **5181 N.W. 2 ST**
 CITY- ST- ZIP **MIAMI, FL 33126**

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

TITLE ☐ Delete
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 STREET ADDRESS
 CITY- ST- ZIP

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TITLE ☐ Change ☐ Addition
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 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 Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rafino D Obando

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-648-2715

CR2E034 (11/00)

Attachment #
90136628

May 16, 2003

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Ultimate Stamp Concrete Inc.
P02000026927


To Whom It May Concern:

As per our telephone conversation with your agent, we are writing to you to request a one-time waiver to renew the above corporation, along with a \$150 payment for the year 2003, as instructed.

As stated to your agent, we never received the 2003 Uniform Business Report. Since our business was opened last March, I was unaware this fee or report existed.

We would appreciate any help you can provide. Thanking you for your consideration.

Sincerely,


Rufino D. Obando
President