

150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT# P02000126082

1. Entity Name

SIDEKICK DUMPSTER SVC., INC.



FILED

03 DEC 16 PM 12:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2521 MARETEE DR.

Suite, Apt. #, etc.

3. Mailing Address
2521 MARETEE DR.

Suite, Apt. #, etc.

City & State
NAPLES, FL

Zip
34114

Country

City & State
NAPLES, FL

Zip
34114

Country

REINSTATEMENT

DO NOT WRITE IN THIS SPACE

03
MRD

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name OSVALDO J. DIAZ

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

2521 MARETEE DR.

City NAPLES

FL

Zip Code
34114

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

(P/D) GINORES, LUCIA
2521 MARETEE DR.
NAPLES, FL 34114

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

(VSD) GINORES, SERGIO
2521 MARETEE DR.
NAPLES, FL 34114

TITLE
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CITY - ST - ZIP

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12/29/03--01010--010 **300.00

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR THE 2003
UNIFORM BUSINESS REPORT.

PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT MY CORPORATION
IN ITS ACTIVE STATUS AND TO WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS
MATTER.

CORDIALLY


GINORES, LUCIA
PRESIDENT