

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P92000011720**

1. Entity Name

NAVARRO SECURITY GROUP, INC.**FILED****Feb 05, 2001 8:00 am**
Secretary of State

02-05-2001 90067 006 ***150.00

Principal Place of Business

**NAVARRO SECURITY GROUP
FT. LAUDERDALE FL 33304**

Mailing Address

**1341 SW 21ST TERRACE
FORT LAUDERDALE FL 33312**

2. Principal Place of Business

1341 SW 21 Terrace

3. Mailing Address

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, Fl.

City & State

Zip

33312

Country

Zip

Country

4. FEI Number

65-0470496

Applied For

Not Applicable

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

Name

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

City

FLZip Code
33312

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) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. 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	PD	<input type="checkbox"/> Delete
NAME	NAVARRO, NICHOLAS G	
STREET ADDRESS	540 N.E. 8 STREET	
CITY-ST-ZIP	FT. LAUDERDALE FL	

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	2225 NE 16 Street	
CITY-ST-ZIP	Ft. Lauderdale, Fl. 33304	

TITLE	VSD	<input type="checkbox"/> Delete
NAME	SHARRON NAVARRO	
STREET ADDRESS	540 NE 8TH STREET	
CITY-ST-ZIP	FT LAUDERDALE FL	

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	2225 NE 16 Street	
CITY-ST-ZIP	Ft. Lauderdale, Fl. 33304	

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

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Nick Navarro*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 12, 2001

Date

954-581-1516

Daytime Phone #

CR2E034 (10/00)