

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90310 042 ***150.00

DOCUMENT # P92000012280 ✓
1. Entity Name
 DAYCO HOLDING CORP.

Principal Place of Business 848 BRICKELL AVE
 SUITE 810
 MIAMI FL 33131
Mailing Address 848 BRICKELL AVE
 SUITE 810
 MIAMI FL 33131

2. Principal Place of Business **3. Mailing Address**

Suite, Apt. #, etc.

City & State

Zip **Country**

4. FEI Number 65-0380784 **Applied For**
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

A0062309

6. Name and Address of Current Registered Agent **7. Name and Address of New Registered Agent**

GORSON, MATTHEW B
 1221 BRICKELL AVE
 84 FLOOR
 MIAMI FL 33131
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 _____ **DATE** _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **FILE NOW!!! FEE IS \$150.00**
 After MAY 1, 2001 Fee will be \$550.00
 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 **12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	PD						
	D'AGOSTINO FRANCO	848 BRICKELL AVE STE 810	MIAMI FL 33131				
	VP						
	LUIS LAMAN	848 BRICKELL AVE STE 810	MIAMI FL 33131				
	VP						
	D'AGOSTINO LUIS ALBERTO	848 BRICKELL AVE STE 810	MIAMI FL 33131				
	VTAS						
	D'AGOSTINO FRANCISCO	848 BRICKELL AVE STE 810	MIAMI FL 33131				

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: _____ **LUIS LAMAN** 4/24/01 305-377-8333
 Signature, typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (1/00)