

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000048502

1. Entity Name

UNIVERSAL RESTAURANT REPAIRS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 JAN -3 AM 11:46

Principal Place of Business
7509 MUTINY AVENUE
NORTH BAY VILLAGE FL 33141

Mailing Address
7509 MUTINY AVENUE
NORTH BAY VILLAGE FL 33141-4332

2. Principal Place of Business
9550 NW 12th Street
Suite, Apt. #, etc.
Box #14
City & State
Miami, Florida
Zip
33172
Country
USA

3. Mailing Address
9550 NW 12th Street
Suite, Apt. #, etc.
Box #14
City & State
Miami, Florida
Zip
33172
Country
USA

REINSTATEMENT

4. FEI Number 65-0443052

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

6. Name and Address of Current Registered Agent

CHIRINO, SANTOS M
7509 MUTINY AVENUE
NORTH BAY VILLAGE FL 33141

7. Name and Address of New Registered Agent

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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
CHIRINO, SANTOS M
7509 MUTINY AVENUE
NORTH BAY VILLAGE FL 33141 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
HERNANDEZ, JAHY D
13858 SW 22ND ST.
MIAMI FL 33175 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
Chirino, Santos M
13000 Coronado Lane
Miami, Florida 33181 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
Hernandez, Jahy D.
3970 SW 2nd Terrace
Miami, FL 33134 ☒ Change ☐ Addition

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
300003532578-005
-01/11/01--01038-005
****758.75 ****758.75 ☐ Change ☐ Addition

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/1/00 (305) 593-5488

CR2E034 (9/99)