

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000051008

1. Entity Name

EXPORT SPECIALTY SERVICES CORP

FILED
Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90120 030 ***150.00

Principal Place of Business

5577 NW 72ND AVE
MIAMI FL 33165
US

Mailing Address

5577 NW 72ND AVE
MIAMI FL 33166-4251
US

2. Principal Place of Business

6905 NW 77 Ave

Suite, Apt. #, etc.

3. Mailing Address

6905 NW 77 Ave.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FL. 33165

City & State

MIAMI, FL

4. FEI Number

65-0424564

Applied For
Not Applicable

Zip

33166

Country

Zip

33166

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PARROTTA, JOSE
5577 NW 72ND AVE
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name

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

6905 NW 77 Ave.

MIAMI.

City

MIAMI

FL

Zip Code

33166

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

1/14/2000

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 PD
NAME PARROTTA, JOSE
STREET ADDRESS 5577 NW 72ND AVE
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE PD
NAME GARIONE, CARINA L
STREET ADDRESS 5577 NW 72 AVE
CITY-ST-ZIP MIAMI FL ☐ 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 6905 NW 77 Ave
CITY-ST-ZIP MIAMI, FL. 33166 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 6905 NW 77 Ave
CITY-ST-ZIP MIAMI, FL. 33166 ☐ Change ☐ Addition

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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:

Jose Parrotta

Date

Daytime Phone #