

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90012 012 ***150.00

DOCUMENT # P93000069759

1. Entity Name
F.S. CANOPYS SUPPLIES, CORP.

R

Principal Place of Business
 8827 N.W. 117TH ST.
 HIALEAH GARDENS FL 33016

Mailing Address
 8827 N.W. 117TH ST.
 HIALEAH GARDENS FL 33016



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

4. FEI Number **65-0442070**
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

FERNANDEZ, MANUEL
 8827 N.W. 117TH ST.
 HIALEAH GARDENS FL 33016

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 _____ 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. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	D	<input type="checkbox"/> Delete
NAME	FERNANDEZ, MANUEL	
STREET ADDRESS	8827 N.W. 117TH ST.	
CITY-ST-ZIP	HIALEAH GARDENS FL 33016	
TITLE	SEC	<input type="checkbox"/> Delete
NAME	FERNANDEZ, MANUEL JR	
STREET ADDRESS	1750 SW 139 CT	
CITY-ST-ZIP	MIAMI FL 33016	
TITLE	FERNANDEZ, JAVIER	<input type="checkbox"/> Delete
NAME	FERNANDEZ, JAVIER	
STREET ADDRESS	7092 W 3 LANE	
CITY-ST-ZIP	HIALEAH FL 33016	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Manuel Fernandez* **DATE:** 07/14/00 **DAYTIME PHONE #:** (305) 826-3400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



F & S Tents

"Party Tent Manufactures"

Attachment
P930000169759
B0103718



7/14/00

ATTN: FLORIDA DEPARTMENT OF STATE

THIS LETTER IS REFERENCE TO THE 2000 UNIFORM BUSINESS REPORT. WE NEVER RECEIVED ANY REPORT, NOW WE RECEIVE A SECOND REQUEST WITH THE TOTAL AMOUNT \$550.00. WE ALWAYS PAY AT TIME, AND THIS IS NOT OUR FAULT. PER OUR CONVERSATION BY THE PHONE WITH A REPRESENTATIVE, SHE TELL US THAT SEND A LETTER EXPLAINING THE REASONS WHY WE ARE NOT GOING TO PAY THAT AMOUNT. THIS SECOND REQUEST IS THE FIRST LETTER THAT OUR COMPANY RECEIVED. THAT'S WHY WE ARE SENDING \$150.00 DOLLARS.

SINCERELY


MANUEL FERNANDEZ SR.