

2000 UNIFORM INITIAL REPORT (UBR)

1052

DOCUMENT # P94000028423

1. Entity Name Cabal Design, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

00 AUG 18 AM 10:47

Principal Place of Business Mailing Address
5851 Holmberg Road, #3021
Parkland, FL 33067

2. Principal Place of Business 5851 Holmberg Road
Suite, Apt. #, etc. Suite 3021
City & State Parkland, FL
Zip 33067 Country
3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0481988
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 David Torchin, C.P.A.
Street Address (P.O. Box Number is not acceptable) 8211 West Broward Blvd.
Suite 200
City Plantation FL Zip Code 33324

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.

David Torchin, C.P.A.

8/17/00

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

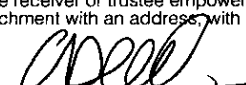
10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P/D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	Mauricio Cabal		NAME		
STREET ADDRESS	5851 Holmberg Road, #3021		STREET ADDRESS		
CITY-ST-ZIP	Parkland, FL 33067		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		
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****450.00 ****450.00

8/18/02

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:  Mauricio Cabal
President
08/17/00 954 3401332
Date Daytime Phone #

CR2E034 (9/99)

2077

Cabal Design, Inc.

5851 Holmberg Road
Suite 3021
Parkland, FL 33067
(954) 340-1332

August 17, 2000

Division of Corporations
Annual Reports Filings
409 East Gaines Street
Tallahassee, FL 32399


Dear Sir or Madam:

It has come to my attention that my corporation has been dissolved for not filing its 1998 Annual Report. I am writing to you this letter because I have no record of ever having received any notices for my 1998 Annual Report. This is because I have had a change of address and my mail was not properly forwarded to my new address.

As such, I would like to request an abatement of the penalties for late filing. Enclosed, you will find an updated Annual Report along with a check for \$450.00.

Thanking you in advance for your attention to this matter.

Sincerely,


Mauricio Cabal
President