

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 26, 2000 8:00 am
Secretary of State
 07-26-2000 90018 049 ***150.00

DOCUMENT # P94000028772

1. Entity Name

AMIGOS IV, INC.

P

Principal Place of Business

120 WESTMONTE DRIVE
 ALTAMONTE SPRINGS FL 32714

Mailing Address

120 WESTMONTE DRIVE
 ALTAMONTE SPRINGS FL 32714

00105070



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6036 S. Orange Blossom TR
 ORLANDO FL

3. Mailing Address

140 N. Westmonte DR Suite 203
 Alt Springs FL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3233949

Applied For

Not Applicable

Zip

Country

Zip

Country

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

HYLTIN, ANDREW A
 120 NORTH WESTMONTE DR.
 ALTAMONTE SPRINGS FL 32714

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 \$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 ☐ Delete
 NAME D
 STREET ADDRESS HYLTIN, ANDREW A
 CITY-ST-ZIP 120 NORTH WESTMONTE DR.
 ALTAMONTE SPRINGS FL 32714

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-20-00

Date

Daytime Phone #

CR2E034 (5/00)

DOC # P94000028772

B0103675

Altamonte Springs
Oviedo
Winter Park
Orlando S.O.B.T.
Church Street
Tavares



Corporate Office
140 N. Westmonte Drive
Suite 203
Altamonte Springs, FL 32714
Office (407) 869-8008
Fax (407) 869-8039

July 20, 2000

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

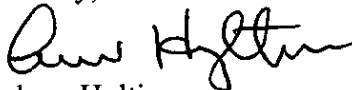
To Whom It May Concern :

This letter is concerning the 2000 Uniform Business Report that is enclosed. We did not receive the first notice. The enclosed is the second notice.

After telephoning your department today, we were instructed to make any necessary address changes and forward this report with a fee of \$150.00.

If you have any questions, please call (407) 869 - 8008.

Sincerely,


Andrew Hyltin

"Home of Texas Hospitality"