

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000053602

1. Entity Name
ARITAUROS, INC.

Principal Place of Business
1001 S CONGRESS AVE
DELRAY BEACH FL 33445

Mailing Address
1001 S CONGRESS AVE
DELRAY BEACH FL 33445

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0501494

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

RIVERO, ANGEL O

1001 S CONGRESS AVE

DELRAY BEACH FL 33445

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 12, 2001 Fee 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
NAME
STREET ADDRESS
CITY-ST-ZIP
DPST
LOZANO-GRAU, MONTSERRAT
1001 S CONGRESS AVE
DELRAY BEACH FL 33445 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
RIVERO, ANGEL
1001 S CONGRESS AVE
DELRAY BEACH FL 33445 ☐ Delete

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

TITLE
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☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Delete

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)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-25-01

561-2728348

FILED
Sep 05, 2001 8:00 am
Secretary of State

09-05-2001 90002 045 ***150.00



DO NOT WRITE IN THIS SPACE

00796389 AV

CR2E034 (5/01)

From: Sherwood Park Teraco
1001 S. Congress Ave.
Delray Beach, FL. 33445

August 25, 20
ATTACHMENT
B0063322

To: Division of Corporations
P.O. Box 1500
Tallahassee, FL. 32302-1500

Dear Sir or Madam,

P94000053602

We are writing to you to explain why this taxes are being sent to you late. We did not even notice they were late until you sent us the second notice. We rely on our book keeper for all of this things, there is a lot of paperwork in this business and we need all the help we can. The girl that takes care of our account had her first baby on December last year making it hard on everyone. We have also been involved in the remodeling of the station and the plans and fees and requirements that we had to meet took a lot out of us. We must have overlooked this and unfortunately it didn't get paid. We always pay our bills on time and we are embarrassed that th happened; we hope that you understand what we went through and consider waving the late penalty fee.

Thank you


JY-12-13