

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000075404

1. Entity Name

LG ENGINEERING SERVICES, INC.

FILED

Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90129 035 ***158.75

Principal Place of Business

7370 NW 36ST
374
MIAMI FL 33166
US

Mailing Address

13380 SW 131 ST
#120
MIAMI FL 33186
US

2. Principal Place of Business

2020 NW 7 STREET

3. Mailing Address

2020 NW 7 STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33125

Country

USA

Zip

33125

Country

USA

6. Name and Address of Current Registered Agent

GARCIA, LEO

13539 SW 101 LANE

MIAMI FL 33186

NEW ADDRESS →

7. Name and Address of New Registered Agent

Name

GARCIA, LEO

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

2020 NW 7 STREET

City

MIAMI

FL

Zip Code

33125

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 \$150.00

After MAY 1, 2001 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	P	<input type="checkbox"/> Delete
NAME	GARCIA, LEO	
STREET ADDRESS	13539 SW 101 LANE	change of address →
CITY-ST-ZIP	MIAMI FL 33186	
TITLE	VPS	<input type="checkbox"/> Delete
NAME	MOHAMAD SONNY SAUEH	
STREET ADDRESS	2370 SW 123 AVE	
CITY-ST-ZIP	MIAMI FL 33175	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARCIA, LEO	
STREET ADDRESS	1320 SW 99 AV.	
CITY-ST-ZIP	MIAMI, FL. 33165	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/2001

Date

305-649-6454

Daytime Phone #