

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000078838

1. Entity Name

PRO-MAX PAINT AND WATERPROOFING CORP.

FILED
Apr 12, 2001 8:00 am
Secretary of State

04-12-2001 90006 021 ***150.00

Principal Place of Business

5407 NW 74TH AVE
MIAMI FL 33166
US

Mailing Address

5407 NW 74TH AVE
MIAMI FL 33166
US

2. Principal Place of Business

6921 NW SI ST

Suite, Apt. #, etc.

3. Mailing Address

6921 NW SI ST.

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

Zip

33166

Country

USA

Zip

33166

Country

U.S.A.

4. FEI Number

65-0530394

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TOWER, MAXIMILIAN
5407 NW 74TH AVE
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name

MAXIMILIAN TOWER

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

6921 NW SI ST

City

MIAMI

FL

Zip Code

33166

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

[Signature]

4/05/2001

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 NAME	PSD TOWER, MAXIMILIAN M	☐ Delete
STREET ADDRESS	5407 NW 74 AVE	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE NAME	V BLANCO, NILSON	☐ Delete
STREET ADDRESS	5407 NW 74 AVE	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE NAME	T TOWER, ALEXANDER	☐ Delete
STREET ADDRESS	5407 NW 74 AVE	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME		☒ Change ☐ Addition
STREET ADDRESS	6921 NW SI ST.	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE NAME		☒ Change ☐ Addition
STREET ADDRESS	6921 NW SI ST.	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE NAME		☒ Change ☐ Addition
STREET ADDRESS	6921 NW SI ST.	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Change ☐ Addition
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

[Signature] MAX TOWER

4-05-2001

Date

Daytime Phone #

305-253-7900

CR2E034 (10/00)