

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000079972

1. Entity Name

RAMOS EQUIPMENT SERVICES, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90044 044 ***150.00

Principal Place of Business

7005 N WATERWAY DR
 307
 MIAMI FL 33155
 US

Mailing Address

7005 N WATERWAY DR
 307
 MIAMI FL 33155-2834
 US

2. Principal Place of Business

1100 W. 29th St.
 Suite H

3. Mailing Address

1100 W. 29th St.
 Suite H

City & State

Hialeah, Florida

City & State

Hialeah, Florida

Zip

33012

Country

USA

Zip

33012

Country

USA

4. FEI Number

65-0530815

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THE LAW FIRM OF LAWRENCE J. SPIGEL, CHART
 AMERILAWYER
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

Martinez, Daniel

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

1100 W. 29th St.

City

Hialeah

FL

Zip Code

33012

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, 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

TITLE PSTD
 NAME RAMOS, LIDIA
 STREET ADDRESS 10936 S.W. 71ST STREET
 CITY-ST-ZIP MIAMI FL 33173 ☒ Delete

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Martinez, Daniel P.T.U.S.D. ☐ Change ☒ Addition
 NAME
 STREET ADDRESS 1100 W. 29th St., Suite H
 CITY-ST-ZIP Hialeah, Florida 3

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

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

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

TITLE ☐ Change ☐ 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

Date

Daytime Phone #

CR2E034 (9/99)