

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000085467

1. Entity Name

AMERISOUTH SERVICES CORP.

**FILED**  
**May 03, 2000 8:00 am**  
**Secretary of State**

05-03-2000 90087 027 \*\*\*163.75

Principal Place of Business

Mailing Address

8227 NW 66TH ST  
 MIAMI FL 33166

8227 NW 66TH ST  
 MIAMI FL 33166-2721

2. Principal Place of Business

8353 NW 68Th. Street

Suite, Apt. #, etc.

N/A

City & State

Miami - Florida

Zip

33166

Country

USA

3. Mailing Address

8353 NW 68Th. Street

Suite, Apt. #, etc.

N/A

City & State

Miami - Florida

Zip

33166

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0556678

X

Applied For

Not Applicable

5. Certificate of Status Desired

X

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

CASTRO, ADRIANA  
 4408 N.W. 74 AVE.  
 SUITE 201  
 MIAMI FL 33166-6443

7. Name and Address of New Registered Agent

Name

RICARDO R. CABANA

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

8353 NW 68Th. Street

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.

Ricardo R. Cabana ( President )

04-24-00

(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 P/D ☒ Delete  
 NAME CASTRO, ADRIANA  
 STREET ADDRESS 4408 N.W. 74 AVE., SUITE 201  
 CITY-ST-ZIP MIAMI FL 33166-6443

TITLE T/D ☒ Delete  
 NAME CABANA, RICARDO R  
 STREET ADDRESS 4408 N.W. 74 AVE., SUITE 201  
 CITY-ST-ZIP MIAMI FL 33166-6443

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 P/D ☒ Change ☐ Addition  
 NAME Ricardo R. Cabana  
 STREET ADDRESS 8353 NW 68Th. Street  
 CITY-ST-ZIP Miami, FL. 33166

TITLE T/D ☐ Change ☒ Addition  
 NAME Maria Elisa Sanchez  
 STREET ADDRESS 8353 NW 68Th. Street  
 CITY-ST-ZIP Miami, FL. 33166

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

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

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 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:

Ricardo R. Cabana ( President )

04-24-00

(305) 220-6400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)