## 2000 UNIFORM BUSINESS REPORT (UBR)

## May 09, 2000 8:00 am Secretary of State DOCUMENT # **P95000025710** ELECTRICAL AND MECHANICAL POWER RESOURCES, INC. 05-09-2000 90057 003 \*\*\*150.00 Principal Place of Business Mailing Address **801 MADRID** 801 MADRID #204 #204 CORAL GABLES FL 33134 CORAL GABLES FL 33134-2262 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0572466 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent IGLESIAS, RAFAEL Street Address (P.O. Box Number is Not Acceptable) 801 MADRID ST #204 CORAL GABLES FL 33134 Zip Code City 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filling requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12 11. TITLE ☐ Change ☐ Addition TITLE ☐ Defete CORTES, MERCEDES NAME NAME STREET ADDRESS STREET ADDRESS 5210 SW 199 AVENUE CITY-ST-ZIP PEMBROKE PINES FL 33332 CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE □ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

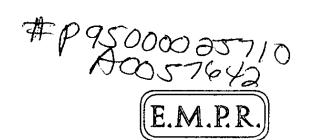
changed, or on an attachment with an address, with all other like empowered. cell

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

SIGNATURE:

**FILED** 

ELECTRICAL and
MECHANICAL
POWER
RESOURCES, inc.



<i>MEMO</i>		
DATE:	5/2/00	
To:	DEPT. OF STATE	
ATTN.:		

FROM:	MERCEDES CORTES	
PHONE:	(954) 680-6344	
FAX PHONE:	(954) 680-6703	
E-MAIL:		
NUMBER OF P	AGES:	
(INCLUDING CO	OVER SHEET) 1	

REMARKS:

☐ Urgent

For your review

Reply ASAP

Please comment

We were unable to submit this payment prior to today since the officers of the corporation were out of town and unable to sign the forms.

Thank you for your consideration.

Main Office P.O. Box 1350 Berthoud, CO 80513 Tel. 970-532-0836 Fax 970-532-0852