

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2002 8:00 am
Secretary of State

05-05-2002 90286 001 ***150.00

DOCUMENT # P95000051768

1. Entity Name
ASSOCIATES HOLDINGS, INC.

Principal Place of Business

14305 SW 57TH LANE
UNIT #1
MIAMI FL 33183
US

Mailing Address

P O BOX 833296
MIAMI FL 33283-3296
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5846 S.W. 144 CIRCLE PL

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Zip

Country

MIAMI FL

33183

USA

4. FEI Number **65-0591846**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

CAZZADO, JR SERGIO E
14305 S W 57TH LANE
UNIT T
MIAMI FL 33186

7. Name and Address of New Registered Agent

Name

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

5846 S.W. 144 CIRCLE PLACE

City **MIAMI**

FL

Zip Code **33183**

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 (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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 ☐ Delete
 NAME **DTPS**
 STREET ADDRESS **SERGIO, CALZADO E JR**
 CITY-ST-ZIP **14305 SW 57 LANE UNIT #1**
MIAMI FL 33183

TITLE ☐ Delete
 NAME **MD**
 STREET ADDRESS **CALZADO, ELSI C**
 CITY-ST-ZIP **14305 SW 57 LANE UNIT #1**
MIAMI FL 33183

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

☒ Change ☐ Addition
 TITLE
 NAME **5846 SW 144 CIRCLE PLACE**
 STREET ADDRESS **MIAMI FL 33183**
 CITY-ST-ZIP

☒ Change ☐ Addition
 TITLE
 NAME **5846 S.W. 144 CIRCLE PLACE**
 STREET ADDRESS **MIAMI FL 33183**
 CITY-ST-ZIP

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 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

SERGIO E. CALZADO, JR.

Date

4/19/02

Daytime Phone #

305-342-4275

CR2E034 (9/01)