

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 09, 2002 8:00 am
Secretary of State

09-09-2002 90016 016 ***150.00

DOCUMENT # P95000054943

1. Entity Name

CARPARK SERVICES INC

DO NOT WRITE IN THIS SPACE

80136985

2. Principal Place of Business
1865 KENNEDY CAUSEWAY
SUITE, APT. #, ETC.
MIAMI 228

3. Mailing Address
1865 KENNEDY CAUSEWAY
SUITE, APT. #, ETC.
MIAMI 228

DO NOT WRITE IN THIS SPACE

City & State Miami Lakes, FL
N. BAY VILLAGE, FL

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N. BAY VILLAGE, FL

4. FEI Number
65-0595910

Applied For
Not Applicable

Zip 33014 **Country** Miami Dade

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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

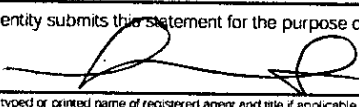
7. Name and Address of Current Registered Agent

Name
LEO DE LA HOZ

Street Address (P.O. Box Number is Not Acceptable)
3785 NW 82 AVE., STE. 102

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 8/29/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR MICHAEL PAGAN 1865 KENNEDY CAUSEWAY N. BAY VILLAGE, FL 33141	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 9/4/02

Daytime Phone # 305 7963602

CR2E034B (12/01)

Attachment

P95000054903

Carpark Services Inc.
6915 Main Street No 228
Miami Lakes, Florida 33014

September 3, 2002

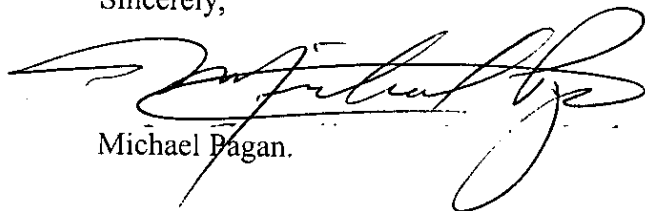
Division of Corporations
P O Box 1500
Tallahassee, Fl. 32302-1500

To Whom It May Concern:

Re: Uniform Business Report 2002.

Per our conversation with your representative, this letter is to inform you that we did not receive the first and second Uniform Business Report 2002. We understand the reason being that mail was not forwarded to our new address. Enclosed is the amount of \$150 for the annual registration. Thank you very much for your attention.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael Pagan", written over a horizontal line.

Michael Pagan.