

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2001 8:00 am
Secretary of State
02-28-2001 90025 044 ***150.00

DOCUMENT # P95000064200

1. Entity Name

ANPESIL OF FLORIDA, INC.

Principal Place of Business

Mailing Address

**7190 NW 12TH STREET
MIAMI FL 33126****7190 NW 12TH STREET
MIAMI FL 33126**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0608693**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PELAEZ, EMILIO
7190 N.W. 12TH STREET
MIAMI FL 33126**

Name

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

City

FL

Zip Code

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
P	ALPIZAR, OLGA	6059 BOULEVARD EAST	WEST NEW YORK NJ 07093	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
VP	PELAEZ, ANTONIO JR.	797 SHETLAND LANE	RIDGEFIELD NJ 07657	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
T	PELAEZ, EMILIO	408 B. ELIZABETH STREET	FORT LEE NJ 07024	<input type="checkbox"/> Delete			7 ALPINE DRIVE	CLOSTER, N.J. 07624	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
S	PELAEZ, LUIS M	811 RAY AVE.	RIDGEFIELD NJ 07657	<input type="checkbox"/> Delete			45 SILO LANE	WARREN, N.Y. 10990	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 any address, with all other like empowered.

SIGNATURE: *x*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*EMILIO PELAEZ**x 2/22/01*

Date

Daytime Phone #

CR2E034 (10/00)