

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000067239

1. Entity Name

CRIME CONTROL OF SOUTH FLORIDA, INC.

Principal Place of Business

7204 S.W. 101 COURT
MIAMI FL 33173
US

Mailing Address

7204 S.W. 101 COURT
MIAMI FL 33173
US

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 65-0604121

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

ROSS, ALEXANDER J SR.
7204 S.W. 101 COURT
MIAMI FL 33173

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 ☐ Delete
P ROSS, ALEXANDER JR.
STREET ADDRESS 6500 S.W. 48 ST.
CITY-ST-ZIP MIAMI FL 33135

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
100004618541--8
-10/01/01--01077--017
****158.75 ****150.00

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

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

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

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

TITLE NAME ☐ Change ☐ Addition
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:

SIGNATURE REQUIRED

9-9-01

(305) 274-9267

Date

Daytime Phone #

6564200

AV

CR2E034 (5/01)

SP

CRIME CONTROL OF SOUTH FLORIDA INC.

7204 SW 101 COURT
Miami - FL - 33173
USA

Phone (954) 322-3177

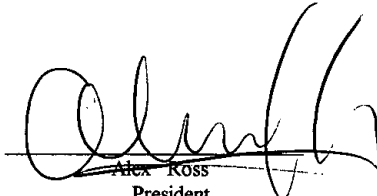
September 14, 2001

Attn.:
Reinstatement Section Div. Corp.

As per my conversation with Michelle Mulligan at your Reinstatement Section, my check, # 1927, dated and sent on April 7th, 2001, for the amount of \$ 158,75, along with the 2001 UBR report, did not arrive or was not processed, Michelle instructed us to send another check for the same amount, along with UBR and this note.

Thank you for your attention at this matter.

Sincerely,


Alex Ross
President