

05/15/2000

10:53

CCRS → 13059615355

APPROVAL
AND
FILED

NO. 640

001

2000 UNIFORM BUSINESS REPORT (UBR)

00 OCT 10 AM 8:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDADOCUMENT # **PA6000006587**

1. Entity Name

ROADWAYS OF TOWNE PARK, INC.

Principal Place of Business

Mailing Address

c/o Shep King, Esq.
21 Floor, 1221 Brickell Avenue
Miami, Florida 33131

2. Principal Place of Business

3. Mailing Address

Suite, Apt #, etc.

Suite, Apt #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

Applied For

Not Applicable

65-9655231

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

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301Name
CorpDirect Agents

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

103 N. Meridian Street, Lower Level

City
Tallahassee

FL

Zip Code
32301

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

Cynthia A. Hilde

9-29-00

Signature typed or printed name of registered agent and fee 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 NUMBER PER IS 5150.00
FEE MAY 15 2000 PER WILL BE \$150.00
MAINTENANCE FEE IS 10.00 PER MONTH10. 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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
Pres/Sec/Trés
Ramon Campollo
c/o Shep King, Esq., 1221 Brickell Avenue
Miami, FL 33131TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
300003447999
-11/02/00--01006--005
***1200.00 ***1200.00TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Pedro Guilarte
Same as aboveTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
Asst. Secretary
Shep King
1221 Brickell Avenue
Miami, FL 33131TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
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 118.07(3)(f), 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

Date

Daytime Phone #

CR25034 (9/99)