

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000007122

1. Entity Name

APPLIED ENGINEERING CONCEPTS, INC.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90016 026 ***150.00

Principal Place of Business

1200 Cresent SW Ave
LA BELLE, FL 33935
US

Mailing Address

P.O. Box 1594
LA BELLE, FL 33935
USA

2. Principal Place of Business

19640 SW 14 Ct.
Suite, Apt. #, etc.

3. Mailing Address

19640 SW 14 Ct.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Pembroke Pines FL

Zip
33029

Country

US

City & State

Pembroke Pines FL

Zip
33029

Country

US

4. FEI Number

65-0637507

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEIGH B. LAKE
19640 SW 14 Ct.
Pembroke Pines FL 33029

7. Name and Address of New Registered Agent

Name LEIGH B. SANCHEZ

Street Address (P.O. Box Number is Not Acceptable)
19640 SW 14 Ct.

City Pembroke Pines

FL

Zip Code
33029

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

LEIGH B. SANCHEZ / PRESIDENT

3-10-00

(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, 2000 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 PSTD
NAME CASTANEDA, MARGARITA ☒ Delete
STREET ADDRESS 1200 Cresent SW AVENUE
CITY-ST-ZIP LA Belle, FL 33935

TITLE PVD
NAME SANCHEZ, LEIGH B. ☐ Change ☒ Addition
STREET ADDRESS 19640 SW 14 Ct.
CITY-ST-ZIP Pembroke Pines FL 33029

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD ☐ Change ☒ Addition
NAME SANCHEZ, MANUEL
STREET ADDRESS 19640 SW 14 Ct.
CITY-ST-ZIP Pembroke Pines FL 33029

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ 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 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

LEIGH B. SANCHEZ / PRESIDENT

Date

3-10-00

Daytime Phone #

(954) 432 3107

CR2E034 (9/99)