FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # P9600043818

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 05, 1999 8:00 am Secretary of State 03-05-1999 90007 016 ***150.00

1. Corporation	UTO SERVICE, INC.	,0 (00)					,			18 111 88 111 18 111	11888 1188 1218	
Principal Place of Business Mailing Address												
1100 W. OAKLAND PARK BLVD 1100 W. OAKLAND PARK BI FT LAUDERDALE FL 33311 FT LAUDERDALE FL 33311				BLVD	VD				DO NOT W	RITE IN THIS	SPACE	
							}	3 Date Incor	porated or Qualife		OI AOL	
								05/16/19				
Principal Place of Business 2a. Mailing Address							4. FEI Numbe		•	А	pplied For	
21		26	26					<u>65-0671</u>	191		N	ot Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					5. Certifcate	of Status Desired			Additional equired
City & State	e		City & State					6. Election C	ampaign Financin	g _	\$5.00	May Be
23		28	28					1	Contribution	*		16 Fees
Zip	Country	Zip		Cou	ntry			8. This corpo	ration owes the co	ırrent year int	angible	_
24	25	29	30						Property Tax.		Yes	□No
	9. Name and Address of Curre	nt Registered A	gent					10. Name and	Address of Nev	v Registered	Agent	
UCDI	MANDEZ LICHDY				81	Name						
HERNANDEZ, HENRY 2900 BANYAN ST				82 Street Add			Addres	ss (P.O. Box Nu	mber is Not Acce	ptable)		
	AUDERDALE FL 33301							.,,				
					84	City					85 Zip	Code
						-				<u>FL</u>	<u> </u>	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Statim familiar with, and accept the oblig	e of Florida, Such	n change was a	uthorized	bv '	the corb	oration	's board of direc	ctors. I hereby acc	cept the appoi	ntment as r	egistered
SIGNATURE	Signature, typed or printed name of registered ag	sent and title if applicable	e. (NOTE	Registered	Agent	t signature	required w	vhen reinstating)		DATE		
12.	*	ND DIRECTORS		13.				ADDITIONS	CHANGES TO	FFICERS AN	D DIRECT	
TITLE	D		☐ DELETE	1,1 TH	ΓLE						Change	☐ Addition
NAME	HERNANDEZ, HENRY			1.2 NA	ME							
STREET ADDRESS	2900 BANYAN ST			1.3 ST	REET	ADDRESS					•	
CITY-ST-ZIP	FT LAUDERDALE FL 33301			1.4 CF	TY-ST	-ZiP	<u> </u>					
TITLE			☐ DELETE	2.1 TIT	TLE						Change	☐ Addition
NAME				2.2 NA	ME							
STREET ADDRESS				2.3 ST	REET	ADDRESS						
CITY-ST-ZIP				2. 4 CI		T-ZIP	ļ					□ Addition
TITLE			☐ DELETE	3.1 TTT	RΕ					•	Change	Addition
NAME				3.2 NA								Į.
STREET ADDRESS				3.3 ST	REET	ADDRESS						
CITY-ST-ZIP		<u>_</u>	C octor	3 4 CI		T- ZIP	-				☐ Change	Addition
TITLE			☐ DELETE	4.1 TI								
NAME				4.2 N		4000000						
STREET ADDRESS						ADDRESS	1					
CITY-ST-ZIP			☐ DELETE	4.4 CI 5.1 TI		1-4IF	+				☐ Change	Addition
TITLE				5.2 NA								_
NAME						ADDRESS						
STREET ADDRESS				5.4 CI								
CITY-ST-ZIP			DELETE	6.1 TI			+			_	☐ Change	☐ Addition
TITLE NAME				62 NA	AME							Ì
						ADDRESS	:					
STREET ADDRESS				6.4 CF								

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an arachment with an address, with all other like empowered.

SIGNATURE: