

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000052029

1. Entity Name  
TREN-D-HOME, INC.

Principal Place of Business  
15959 PINES BLVD.  
HOLLYWOOD FL 33027  
US

Mailing Address  
15959 PINES BLVD.  
HOLLYWOOD FL 33027  
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 65-0676643

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

COLLAZO, ANA T  
8280 PINES BLVD.  
PEMBROKE PINES FL 33024

Name COLLAZO, ANA T.

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

15959 PINES BLVD

City Pembroke Pines FL Zip Code 33027

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 D ☐ Delete  
NAME DE ORO, ANTONIO  
STREET ADDRESS 19064 N.W 13TH STREET  
CITY-ST-ZIP PEMBROKE PINES FL 33029

TITLE ☒ Change ☐ Addition  
NAME DE ORO, ANTONIO  
STREET ADDRESS 55 NW 207 ST  
CITY-ST-ZIP MIAMI, FL. 33169

TITLE D ☐ Delete  
NAME DE ORO, DAWN  
STREET ADDRESS 19064 N.W 13TH STREET  
CITY-ST-ZIP PEMBROKE PINES FL 33029

TITLE ☒ Change ☐ Addition  
NAME DE ORO, DAWN  
STREET ADDRESS 55 NW 207 ST  
CITY-ST-ZIP MIAMI, FL. 33169

TITLE D ☐ Delete  
NAME GONZALEZ, ALEJANDRO J  
STREET ADDRESS 19093 N.W 12TH COURT  
CITY-ST-ZIP PEMBROKE PINES FL 33029

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

TITLE D ☐ Delete  
NAME COLLAZO, ANA T  
STREET ADDRESS 19093 N.W 12TH COURT  
CITY-ST-ZIP PEMBROKE PINES FL 33029

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  
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:

*Antonio De Oro* ANTONIO DE ORO 4/16/01 954-441-1184

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
Apr 23, 2001 8:00 am  
Secretary of State  
04-23-2001 90202 016 \*\*\*150.00

745735



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)