

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000071454

1. Entity Name

DETAIL EXCELLENCE BODY SHOP, INC.

FILED

Feb 05, 2000 8:00 am  
Secretary of State

02-05-2000 90002 013 \*\*\*158.75

Principal Place of Business

5700 N.W. 35TH AVE.  
MIAMI FL 33142

Mailing Address

5700 N.W. 35TH AVE.  
MIAMI FL 33142-2708

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

10562 N.W. 52nd Terrace

Suite, Apt. #, etc.

Miami, FL 33178

City & State

Zip

Country

4. FEI Number

65-0749717

Applied For

Not Applicable

5. Certificate of Status Desired

XIXX

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BARQUERO, ELIZABETH  
5700 N.W. 35TH AVE.  
MIAMI FL 33142

Name

APOLONIA BERMUDEZ

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

10562 N.W. 52nd Terrace

Miami, Florida.

City

FL

Zip Code

33178

7. Name and Address of New Registered Agent

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  
January 31, 2000

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

TITLE PTD  
NAME BARQUERO, JOSE N  
STREET ADDRESS 300 N.W. 42 AVE., #608  
CITY-ST-ZIP MIAMI FL 33126 ☒ Delete

TITLE VSD  
NAME BARQUERO, ELIZABETH  
STREET ADDRESS 300 N.W. 42 AVE., #608  
CITY-ST-ZIP MIAMI FL 33126 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President Treasurer & Director  
NAME APOLONIA BERMUDEZ  
STREET ADDRESS 10562 N.W. 52nd Terrace  
CITY-ST-ZIP Miami, FL 33178 ☒ Change ☐ Addition

TITLE VICE PRESIDENT/SECRETARY & Director  
NAME HUMBERTO Q. HERNANDEZ  
STREET ADDRESS 935 E. 31st Street  
CITY-ST-ZIP Hialeah, Florida. 33013 ☒ Change ☐ Addition

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

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

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

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

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:

APOLONIA BERMUDEZ, Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/31/00 (305) 633-7066