

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000077552

1. Entity Name

NAVARRO TECHNICAL SERVICES, INC.

FILED
Feb 16, 2000 8:00 am
Secretary of State

02-16-2000 90026 038 ***150.00

Principal Place of Business

803 NE 5TH TERRACE
FORT LAUDERDALE FL 33304

Mailing Address

540 NE 8TH STREET
STE. 200
FT. LAUDERDALE FL 33304-2715

2. Principal Place of Business

NAVARRO TECHNICAL SERVICE
Suite, Apt. #, etc.

3. Mailing Address

1341 S.W. 21ST TERRACE
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

FORT LAUDERDALE FL.

City & State

FORT LAUDERDALE FL.

4. FEI Number

65-0698349

Applied For

Not Applicable

Zip

Country

33312 U.S.A.

Zip

Country

33312 U.S.A.

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

NAVARRO, SHARRON
540 N.E. 8TH AVENUE
SUITE 200
FORT LAUDERDALE FL 33304

Name

NAVARRO, SHARRON

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

1341 S.W. 21ST TERRACE

City

FORT LAUDERDALE

FL

Zip Code

33312

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

Sharron Navarro

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

02-04-00

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 PD ☐ Delete
NAME NAVARRO, NICHOLAS
STREET ADDRESS 2225 NE 16TH STREET
CITY-ST-ZIP FORT LAUDERDALE FL 33304

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

TITLE VPD ☐ Delete
NAME NAVARRO, SHARRON
STREET ADDRESS 2225 NE 16TH STREET
CITY-ST-ZIP FORT LAUDERDALE FL 33304

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

Sharron Navarro

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-04-00

Date

Daytime Phone #

CR2E034 (9/99)