

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000090082

1. Entity Name

ALTERNATIVE RECOVERY SERVICES, INC.



Principal Place of Business

2880 W OAKLAND PK BLVD
209
FT LAUDERDALE FL 33311
US

Mailing Address

2880 W OAKLAND PK BLVD
209
FT LAUDERDALE FL 33311
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

65-0702595

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

VILLANUEVA, VICTOR
3000 NW 5TH TERR #111
POMPANO BEACH FL 33064

Name

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

City

FL

Zip Code

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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
NAME VILLANUEVA, VICTOR
STREET ADDRESS 3000 NW 5TH TERR #111
CITY-ST-ZIP POMPANO BEACH FL 33064-1662 ☐ Delete

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

TITLE VD
NAME COCHRANE, THOMAS H
STREET ADDRESS 1634 SW 4TH AVE
CITY-ST-ZIP FT LAUDERDALE FL 33315 ☐ Delete

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

TITLE SD
NAME NOVAK, PATRICIA
STREET ADDRESS 1634 SW 4TH AVE
CITY-ST-ZIP FT LAUDERDALE FL 33315 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Sep 11, 2000 8:00 am
Secretary of State

09-11-2000 90005 033 ***150.00

A0075863



DO NOT WRITE IN THIS SPACE

CE 1004 (1/00)

Attachment
P 96000090082
A0075868

September 5, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Fl 32302-1500

Dear Sir or Madam:

I am contacting you concerning the filing of the Uniform Business Report for Alternative Recovery Services, Inc. Document # P96000090082 FEI # 65-0702595.

The corporation is in a dispute between Thomas Cochrane and Patricia Novak against Victor Villanueva. It has been in litigation since October 1, 1999. Unfortunately, the first notice that was sent was either never received or received by Mr. Villanueva and the other two Directors had no knowledge that the filing fees were not paid until the second notice arrived. We believe that he didn't file and didn't tell the other Director's because he wants the corporation to close obviously to benefit himself somehow because of the dispute.

At this time, the corporate bank account is frozen and the filing fee has to be paid personally by one of the Directors. It seems that the responsibility of that has fallen on Thomas Cochrane and Patricia Novak. The fee would have been paid much sooner were it not for the fact that they work for the Bounty Hunter Program for the State of Florida and there was a holdup on payment of seized tags.

We are asking for a waiver of the late fee because of the situation that the corporation is in at the present time. We are sending the \$150 in hopes that you will accept this and maintain the status of Alternative Recovery Services, Inc.

Thank you for your consideration.

Sincerely,



Thomas Cochrane
Vice-President
Alternative Recovery Services, Inc.