

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000095451

1. Entity Name

PUIG ENTERPRISES, INC.

Principal Place of Business

Mailing Address

2. Principal Place of Business

10217 E. COLQUIAL DR.

Suite, Apt. #, etc.

3. Mailing Address

2612 FALMOUTH RD.

Suite, Apt. #, etc.

City & State

ORLANDO, FL

City & State

MAITLAND, FL

Zip

32817

Country

ORANGE

Zip

32751

Country

SEMINOLE

4. FEI Number

59-3408236

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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 \$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 NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
PRESIDENT Tina T. Puig 2612 Falmouth Rd. Mait. Fl. 32751	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
PRESIDENT Tina T. Puig 2612 Falmouth Rd. MAITLAND, FL 32751	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 #

12/20/00 407-834-6859

CR2E034 (9/99)

PUIG ENTERPRISES, INC  
2612 FALMOUTH RD.  
MAITLAND, FL 32751

December 20, 2000

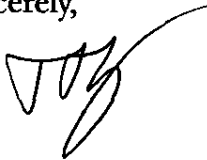
In reply to: Letter Number: 000A00061241

Sean Toner  
Division of Corporations  
P.O. Box 6327  
~~Tallahassee, FL 32314~~

Dear Sean Toner:

As per your instructions, this letter is to inform you that my corporation did not receive the previous uniform business report notices. Enclosed also is the \$150.00 filing fee, and a completed uniform business report. Thank you for your assistance in this matter.

Sincerely,



Tina T. Puig  
PUIG ENTERPRISES, INC.