

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000009819

1. Entity Name

SOUTH SERVICES, INC.

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90148 018 ***158.75

Principal Place of Business

Mailing Address

10201 HAMMOCKS BLVD
122
MIAMI FL 33196
US

10201 HAMMOCKS BLVD
122
MIAMI FL 33196
US

2. Principal Place of Business

13270 SW 131 Street

3. Mailing Address

13270 SW 131 Street

Suite, Apt. #, etc.

131

Suite, Apt. #, etc.

131

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33186

Country

U.S.A.

Zip

33186

Country

U.S.A.

4. FEI Number

65-0748362

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HART, DAVID J
100 N BISCAYNE BLVD
SUITE 2600
MIAMI FL 33132

7. Name and Address of New Registered Agent

Name

EDGARDO R. FERNANDEZ

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

13270 SW 131 Street

#131

City

MIAMI

FL

Zip Code

33186

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.

EDGARDO R. FERNANDEZ

(NOTE: Registered Agent signature required when reinstating)

DATE

4/27/01

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

TITLE P/D
NAME FERNANDEZ, EDGARDO R
STREET ADDRESS 10201 HAMMOCKS BLVD STE 122
CITY-ST-ZIP MIAMI FL 33196

☐ Delete

TITLE
NAME
STREET ADDRESS
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP

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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

EDGARDO R. FERNANDEZ

Date

Daytime Phone #

4/27/01

305-752-4701

CR2E034 (10/00)

0238934