

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000024618

1. Entity Name

ANDER POLICE SUPPLY, INC.

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

09-11-2000 90075 046 \*\*\*550.00

Principal Place of Business

3540 N.W. 72 AVE.  
MIAMI FL 33122

Mailing Address

3540 N.W. 72 AVE.  
MIAMI FL 33122

2. Principal Place of Business

1950 N.W. 88th COURT

3. Mailing Address

1950 NW 88th COURT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI

City & State

FLORIDA

4. FEI Number

65-0744000

Applied For

Not Applicable

Zip

33172

Country

Zip

33172

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GARCIA, CARLOS ESQ.  
265 SEVILLA AVE.  
CORAL GABLES FL 33134

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 \$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

TITLE PDS  
NAME DIELINGEN, ANDRES  
STREET ADDRESS 3540 N.W. 72 AVE.  
CITY-ST-ZIP MIAMI FL 33122  
1950 N.W. 88 CT  
MIAMI FL 33172

☐ Delete

TITLE VPT  
NAME DIELINGEN, MARIANELLA  
STREET ADDRESS 3540 NW 72 AVE  
CITY-ST-ZIP MIAMI FL 33122

☒ 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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VP-TREASURER  
NAME MERCEDES DELGADO  
STREET ADDRESS 3540 N.W. 88 CT  
CITY-ST-ZIP MIAMI FL 33172

☐ Change ☒ Addition

TITLE DIRECTOR  
NAME MARIANELLA DIELINGEN  
STREET ADDRESS 1950 N.W. 88 CT  
CITY-ST-ZIP MIAMI FL 33172

☐ 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:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09/08/00

(305) 5998878  
Daytime Phone #

CR2E034 (5/00)