

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 90897 031 ***158.75

DOCUMENT # P97000024618

1. Entity Name
ANDER POLICE SUPPLY, INC.

Principal Place of Business

1950 NW 88TH CT
 MIAMI FL 33172

Mailing Address

1950 NW 88TH CT
 MIAMI FL 33172

2. Principal Place of Business

4680 N.W. 114 Avenue
 Suite, Apt. #, etc.
 201
 City & State
 MIAMI

3. Mailing Address

4680 N.W. 114 Avenue
 Suite, Apt. #, etc.
 201
 City & State

City & State

MIAMI

City & State

MIAMI

Zip
 33178

Country
 USA

Zip
 33178

Country

4. FEI Number 65-0744000

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

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

7. Name and Address of New Registered Agent

Name Andres E. Diegingen
Street Address (P.O. Box Number is not acceptable) 4680 N.W. 114 Avenue #201
City MIAMI **FL** **Zip Code** 33178

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

(NOTE: Registered Agent signature required when reinstating)

DATE

April 29 2002

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE PDS ☐ Delete
NAME DIELINGEN, ANDRES
STREET ADDRESS 1950 NW 88 CT
CITY-ST-ZIP MIAMI FL 33172

TITLE D ☒ Delete
NAME DIELINGEN, MARIANELLA
STREET ADDRESS 1950 NW 88 CT
CITY-ST-ZIP MIAMI FL 33172

TITLE V ☒ Delete
NAME DELGADO, MERCEDES
STREET ADDRESS 3507 OAKS WAY BLDG 114 #802
CITY-ST-ZIP POMPANO BEACH FL 33069

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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)(f), 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]* Andres Diegingen

April 29 2002

CR2E034 (9/01)