

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 26, 2002 8:00 A.M**  
**Secretary of State**

DOCUMENT #

1. Entity Name

P97000029274

**ED GARCIA, INC.**

**DO NOT WRITE IN THIS SPACE**

600005493166--6  
-05/09/02--01003--027  
\*\*\*\*300.00 \*\*\*\*300.00

2. Principal Place of Business

**149 GRANADA DRIVE**

Suite, Apt. #, etc.

3. Mailing Address

**149 GRANADA DRIVE**

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

**PALM SPRINGS, FL**

City & State

**PALM SPRINGS, FL**

4. FEI Number

**65-6820984**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

7. Name and Address of Current Registered Agent

Name

**HERBERTO GARCIA**

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

**149 GRANADA DRIVE**

City

**PALM SPRINGS**

FL

Zip Code

**33461**

**DO NOT WRITE  
IN THIS SPACE**

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 resigning)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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  
NAME

STREET ADDRESS

CITY - ST - ZIP

**D  
HERBERTO GARCIA  
149 GRANADA DRIVE  
PALM SPRINGS, FL 33461**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE  
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/02 (90) 547-5775  
Date: Anytime Before 7

CR2E034B (12/01)

April 23, 2002

Re: Uniform Business Report  
Ed Garcia, Inc.  
65-0820984

To Whom It May Concern:

I am sending you my Uniform Business Report for this year 2002 with a check to pay for 2002 and 2001 (\$150/year). I understand that my corporation was dissolved because I did not send in a Uniform Business report last year. The reason I did not send in a report for 2001 was because I never received a report in the mail to send in last year.

If there is anything else I need to do to reactivate my corporation please contact me at your convenience.

Sincerely,



Heriberto Garcia