

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000035617

1. Entity Name

VALPAR CONSULTANTS, INC.

FILED
Sep 14, 2000 8:00 am
Secretary of State

09-14-2000 90016 011 ***550.00

Principal Place of Business

12715 SW 33RD TERR
MIAMI FL 33175

Mailing Address

12715 SW 33RD TERR
MIAMI FL 33175

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0749698

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

ROBERT PELIER, ESO
350 SEVILLA AVE #201
CORAL GABLES FL 33154

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: ☐ Delete
NAME: D BERNARDO, MANUEL O
STREET ADDRESS: 5657 SW 142ND AVE.
CITY-ST-ZIP: MIAMI FL 33183

TITLE: ☐ Delete
NAME: ST LISETTE V DEAS-BERNARDO
STREET ADDRESS: 5657 SW 142ND AVE
CITY-ST-ZIP: MIAMI FL 33183

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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: D BERNARDO, MANUEL O
STREET ADDRESS: 12715 SW 33RD TERR.
CITY-ST-ZIP: MIAMI, FL 33175

TITLE: ☒ Change ☐ Addition
NAME: ST DEAS-BERNARDO, LISETTE
STREET ADDRESS: 12715 SW 33RD TERR.
CITY-ST-ZIP: MIAMI, FL 33175

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
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)(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 #

Lisette V. Deas-Bernardo 9/12/00 305-480-8824

CF2E034 (5/00)