

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

P97000047848

AMPRO SERVICES, INC

Principal Place of Business

Mailing Address

15963 SW 139ST
MIAMI, FL 33196

SAME

2. Principal Place of Business

3. Mailing Address

SAME

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0762515

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

7. Name and Address of New Registered Agent

GONZALO TORAR
15963 SW 139ST
MIAMI, FL 33196

Name CESAR CUNEO

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

15963 SW 139ST
MIAMI, FL 33196

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

GONZALO TORAR

CESAR CUNEO

10/05/00

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTD ☐ Delete

NAME CESAR CUNEO
STREET ADDRESS 15963 SW 139ST
CITY-ST-ZIP MIAMI, FL 33196

TITLE VICE PRESIDENT ☐ Delete

NAME GONZALO TORAR
STREET ADDRESS 15963 SW 139ST
CITY-ST-ZIP MIAMI, FL 33196

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

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CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
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TITLE ☐ Change ☐ Addition

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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 #

10/5/00

305 232-2102

CR2E034 (9/99)

AMPRO SERVICES, INC

15963 SW 139 ST

Miami, Florida 33196

Tel. : (305) 232-2102

Fax. : (305) 232-2227

Miami October 10, 2000

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

DEAR SIR,

Our company moved early this year to it's no new address of 15963 SW 139 ST, Miami, Fl 33196. So for some reason we didn't received a 2000 uniform business report, so we didn't file accordingly. We are really sorry about this and we ask for your to understand the we are a very small company, home based and are not doing to much business. At the same time we don't have the experience and all documents and forms we need to be file each year. We recently found that didn't file so we have requested this form which we are sending. We hope that you understand this a give us chance. We cannot afford to pay a bigger fee, which will hurt us.

Sincerely,



Gonzalo E. Tovar