

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000081639

1. Entity Name

GORDILLO SERVICES, INC.

**FILED**  
**Jul 12, 2000 8:00 am**  
**Secretary of State**

07-12-2000 90011 050 \*\*\*150.00

Principal Place of Business

Mailing Address

7840 NW 3RD ST. #10-201  
PEMBROKE PINES FL 33024

7840 NW 3 ST  
10-201  
PEMBROKE PINES FL 33024-1265  
US

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

65-0787357

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

MONTROYA, A  
261 SW 100 AVE  
PEMBROKE PINES FL 33025

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]*

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 \$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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PTD  
GORDILLO, GUIDO  
7840 NW 3RD ST, #10-20  
PEMBROKE PINES FL 33024 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
GORDILLO, YOLANDA  
7840 NW 3RD ST, #10-20  
PEMBROKE PINES FL 33024 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
GORDILLO, K  
7840 NW 3ST, 10-201  
PEMBROKE PINES FL 33024 ☐ Delete

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

TITLE  
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CITY-ST-ZIP  
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☐ Change ☐ Addition

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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)(l), 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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CF 2 0 4 (3/99)

P97000081639

A00607468

JUNE 22<sup>ND</sup>, 2000

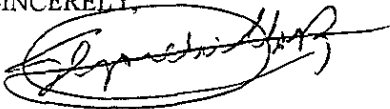
DEPT. OF STATE  
DIVISION OF CORPORATIONS  
PO BOX 6327  
TALLAHASSEE, FL. 32314

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ENCLOSED IS OUR ANNUAL REPORT TOGETHER WITH THE FEE OF 150.00.  
THE OFFICERS OF THIS COMPANY WERE OUT OF THE STATE AND HAVE JUST ARRIVED  
AND SAW THAT THEY HAD NOT MAILED THE ANNUAL REPORT. PLEASE UNDERSTAND  
THIS INSTANCE AND GRANT US A GRIEVANCE FOR THE TARDINESS OF THE REPORT.

SINCERELY,

X

A handwritten signature in dark ink, appearing to be "Eugene H. [unclear]", is written over a horizontal line. The signature is enclosed within a hand-drawn oval.