

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000084621

FILED  
Apr 24, 2002 8:00 AM  
Secretary of State

**Entity Name:** FIAD & ASSOCIATES CONSUMER SERVICE, INC.

## Current Principal Place of Business:

6401 SW 87 AVE  
SUITE 114  
MIAMI, FL 331732520 US

## New Principal Place of Business:

9221 SUNSET DRIVE  
MIAMI, FL 331733239 US

## Current Mailing Address:

6401 SW 87 AVE  
SUITE 114  
MIAMI, FL 331732520 US

## New Mailing Address:

9221 SUNSET DRIVE  
MIAMI, FL 331733239 US

**FEI Number:** 65-0783938

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

## Name and Address of Current Registered Agent:

FIAD, YVONNE  
7401 SW 70 TERRACE  
MIAMI, FL 331432813 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FIAD, YVONNE  
Address: 7401 SW 70 TER  
City-St-Zip: MIAMI, FL 331432813

Title: VS ( ) Delete  
Name: FIAD, GEORGE A SR  
Address: 7401 SW 70 TER  
City-St-Zip: MIAMI, FL 331432813

Title: T ( ) Delete  
Name: FIAD, DELIA  
Address: 7401 SW 70 TER  
City-St-Zip: MIAMI, FL 33143

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE A. FIAD, SR.

VS

04/24/2002

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date