

2000 UNIFORM BUSINESS REPORT (UBR)

1092

DOCUMENT # P97000089271

1. Entity Name
MESCARB, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUL 20 AM 8:12

Principal Place of Business
14730 NE 10TH AVE.
MIAMI FL 33161

Mailing Address
C/O PEREZ BEHAR & ASSOC., INC.
14730 NE 10TH AVE
N. MIAMI FL 33161



DO NOT WRITE IN THIS SPACE

Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

Mailing Address
PEREZ BEHAR & ASSOC., P.A.
13935 NW 1st AVENUE
MIAMI, FLORIDA 33168
City & State
Zip

4. FEI Number **65-0786252**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
PEREZ BEHAR & ASSOCIATES, INC.
14730 NE 10TH AVE.
N. MIAMI FL 33161

7. Name and Address of New Registered Agent
Name
PEREZ BEHAR & ASSOC., P.A.
Street Address (P.O. Box Number is Not Acceptable)
13935 NW 1st AVENUE
MIAMI, FLORIDA 33168
City
FL Zip Code

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 *Ramon Perez - Vice-Pres. Perez Behar Assoc. 4-18-00*
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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

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**

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
ADDRESS ST-ZIP	PD MESTRE, JUAN F 14730 NE 10TH AVE. N. MIAMI FL 33161 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5 Julio A. Mestre 13935 NW 1st Ave. Miami, FL 33168 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
ADDRESS ST-ZIP	VD CABALLERO, SANDRA T 14730 NE 10TH AVE. N. MIAMI FL 33161 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	700003344587--8 -08/02/00--01011--024 ****150.00 ****150.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
ADDRESS ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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ADDRESS ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 furnished 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 individuals empowered.

SIGNATURE *Juan F. Mestre* Pr. 4/18/00 688-9694
Signature typed or printed name of signing officer or director Date

CR2F034 (5/00)

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July 17th, 2000

State of Florida Division of Corporations
PO Box 6327
Tallahassee, Fl. 32314

RE: MESCAB, Inc.
Doc#: P97000089271

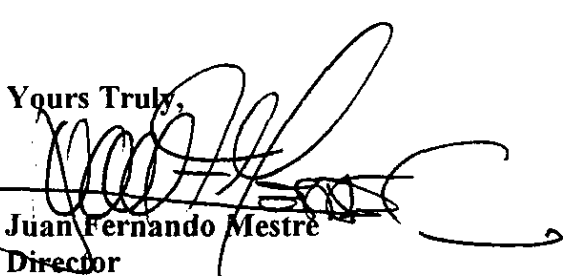
To whom it may concern:

Please be advised that we are in receipt of a Uniform Business Report for the above corporation, we sent the original report with check number 3876 from Perez, Behar & Associates, PA and after checking with the bank the check has not been cashed therefore we place a stop payment on the check and we are sending a replacement check with this letter and a copy of the original report.

If you have any questions please do not hesitate to call us at (305) 688-9694.

Thank you for your cooperation.

Yours Truly,


Juan Fernando Mestre
Director