

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000091234

1. Entity Name

GARCIA PRODUCTION GROUP, INC.

FILED
Jan 24, 2000 8:00 am
Secretary of State

01-24-2000 90070 042 ***150.00

Principal Place of Business

Mailing Address

23108 POST GARDENS WAY
#217
BOCA RATON FL 33433

P.O. BOX 273442
BOCA RATON FL 33427-3442

2. Principal Place of Business

23108 Post Gardens Way
Suite, Apt. #, etc.
#217

3. Mailing Address

P.O. Box 273442

Suite, Apt. #, etc.

City & State

Boca Raton Florida

City & State

Boca Raton, Florida

Zip

33433

Country

USA

Zip

33427

Country

USA

4. FEI Number

65-0791039

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOODWIN-GARCIA, BRENDA L
23108 POST GARDENS WAY
#217
BOCA RATON FL 33433

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 \$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: PD
NAME: GARCIA, EDGAR
STREET ADDRESS: 23108 POST GARDENS WAY SUITE 217
CITY-ST-ZIP: BOCA RATON FL 33433

☐ Delete

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STREET ADDRESS
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☐ Change ☐ Addition

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☐ 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)(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: *Edgar Garcia*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-16-2000 561 702-0314

CR2E034 (9/99)