

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 03, 2002 8:00 am
Secretary of State

09-03-2002 90182 003 ***150.00

DOCUMENT # P98000011292

1. Entity Name
ISAAC ASSOCIATES, INC.

Principal Place of Business
7130 SW 5TH STREET
PEMBROKE PINES FL 33023

Mailing Address
7130 SW 5TH STREET
PEMBROKE PINES FL 33023
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 **65-0817453**

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

ISAAC, MIKEL
7130 SW 5 STREET
PEMBROKE PINES FL 33023

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee 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**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P**
NAME **ISAAC, MIKEL**
STREET ADDRESS **7130 SW 5TH STREET**
CITY-ST-ZIP **PEMBROKE PINES FL 33023**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **V**
NAME **MALDONADO, JULIETTE**
STREET ADDRESS **4100 NW 193 ST**
CITY-ST-ZIP **MIAMI FL 33055**

☐ Delete

TITLE
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CITY-ST-ZIP

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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)(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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug 7, 2002

954 9633948

CR2034 (4/02)

Attachment
ISAAC ASSOCIATES, INC.

7130 SW 5 STREET
PEMBROKE PINE, FL. 33023
PH 954-963-3948

977998

FACSIMILE TRANSMITTAL SHEET

TO:	FROM: Gilbert Estime
COMPANY:	DATE: 8/7/2002
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
RE:	YOUR REFERENCE NUMBER:

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

NOTES/COMMENTS:

To Whom It May Concern:

It has brought to my attention that UBI annual form that was sent in early March did not arrive at its intended location. For some reason, the original paper work must have gotten lost in transit to your office. To rectify this problem, we have enclosed a check for \$150 and a copy of the UBI that we have just received from your office. Please process this application ASAP, so that we may insure that our company remains in good standing, so

Mikel Isaac
Mikel Isaac

President