

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000013870

1. Entity Name
SELCOR, INC.

FILED
Apr 28, 2001 8:00 am
Secretary of State
04-28-2001 90019 005 ***150.00

0130055

Principal Place of Business
**3015 NW 91ST AVE. NO. 104
CORAL SPRINGS FL 33065**

Mailing Address
**3015 NW 91ST AVE. NO. 104
CORAL SPRINGS FL 33065**

2. Principal Place of Business
**8401 W. SAMPLE RD NO. 25
CORAL SPRINGS, FL 33065**

3. Mailing Address
**8401 W. SAMPLE RD. NO. 25
CORAL SPRINGS, FL 33065**

Suite, Apt. #, etc.
NO. 25

Suite, Apt. #, etc.
NO. 25



DO NOT WRITE IN THIS SPACE

City & State
CORAL SPRINGS, FL

City & State
CORAL SPRINGS, FL.

4. FEI Number **NOT APPLICABLE** Applied For ☐ Not Applicable ☐

Zip
33065

Country
USA

Zip
33065

Country
USA

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

6. Name and Address of Current Registered Agent
**COLON, RICARDO
3015 NW 91ST AVE. NO. 104
CORAL SPRINGS FL 33065**

7. Name and Address of New Registered Agent
Name **Colon, Ricardo**
Street Address (P.O. Box Number is Not Acceptable)
**8401 W. SAMPLE RD
NO. 25**
City **CORAL SPRINGS FL** Zip Code **33065**

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 _____ (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, 2001 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	P	<input type="checkbox"/> Delete	TITLE	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLON, RICARDO		NAME	COLON, RICARDO	
STREET ADDRESS	3015 NW 91ST AVE- #104		STREET ADDRESS	8401 W. SAMPLE RD #25	
CITY-ST-ZIP	CORAL SPRINGS FL 33065		CITY-ST-ZIP	CORAL SPRINGS, FL. 33065	
TITLE	VP	<input type="checkbox"/> Delete	TITLE	VP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLON, CARMEN R		NAME	COLON, CARMEN R	
STREET ADDRESS	3015 NW 91ST AVE- #104		STREET ADDRESS	8401 W. SAMPLE RD #25	
CITY-ST-ZIP	CORAL SPRINGS FL 33065		CITY-ST-ZIP	CORAL SPRINGS, FL. 33065	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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: Ricardo Colon 4/22/01 954-255-7633
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)