

## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 98000018685

1. Entity Name

MORTUARY CARE FACILITY  
INC.APPROVAL  
AND  
FILE

00 JAN 27 PM 12:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

167 NE. 26th St., Suite #A  
Miami, Florida 33137

2. Principal Place of Business

167 NE. 26th St.

3. Mailing Address

P.O. Box 1272

Suite, Apt. #, etc.

A

Suite, Apt. #, etc.

City &amp; State

Miami, Fla. 33137

City &amp; State

Ft. Lauderdale, Fla. 33302

Zip

33137

Country

DADE

Zip

33302

Country

BROWARD

DO NOT WRITE IN THIS SPACE

4. FEI Number

Not Applicable

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

JOSEPH DAMIANO  
P.O. Box 1272  
Ft. Lauderdale, Fla.  
33302

167 NE 26 STREET

MIAMI FLA - 33137

7. Name and Address of New Registered Agent

Name

Joseph DAMIANO

Street Address (P.O. Box Number is Not Acceptable)

167 NE 26 STREET

City

MIAMI FLA

FL

Zip Code

33137

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

X Joseph Damiano

Signature of individual or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

01-24-2000

9. This corporation is eligible to satisfy its Intangible  
tax filing requirement and elects to do so.  
(See criteria on back)

XX

FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2000 Fee will be \$550.00  
Make Check Payable to Department of State10. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME President  
STREET ADDRESS Joseph Damiano  
CITY-ST-ZIP P.O. Box 1272, Ft. Lauderdale, Fla. 33302TITLE ☐ Delete  
NAME DeoGracio Maldonado  
STREET ADDRESS (Secretary-Treasurer)  
CITY-ST-ZIP 550 NW. 27th Ave., Suite # 1-A  
Ft. Lauderdale, Fla. 33311TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP 400003136604--6TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP -02/15/00--01122--002  
\*\*\*\*150.00 \*\*\*\*150.00TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph DAMIANO

Date

1-24-2000

Overnight Phone #

# JOSEPH DAMIANO

P.O. Box 1272  
Ft. Lauderdale, Florida 33302

( ) 584-1111

January 24, 1 2000.

**TO: DIVISION OF CORPORATIONS**  
**ATTENTION: Ms. Michelle Milligan**  
P.O. BOX 6327  
Tallahassee, Florida 32314

(850) 487-6059

**RE: TWO SEPARATE INDIVIDUAL (UBR) 2000 REPORTS, FILING FEES, FOR THE**  
**FOLLOWING: MORTUARY CARE FACILITY AND CREMATION CARE CENTER, INC.**

Dear Ms. Milligan:

Regarding the above-captioned please find enclosed individual and separate UBR 2000 Reports as well as the required filing fees.

Please take notice that as in our previous discussions as indicated, these matters had been previously mailed by me for filing with your Office, however, through no culpable negligence of my own, these previous matters mailed to you were mis-directed in the mail, thus is the reason for the delay.

Accordingly, I am requesting that the penalty fees assessed be waived. If necessary and you are in need of an Affidavit from me, please so advise and I will remit same to you immediately.

If you have any further questions and/or concerns, Please advise and I'll respond immediately.

Thank You for your kind time and assistance in this matter. Thanking You in advance for your promptness in the filing of the within.

I remain

Very Truly Your's



JOSEPH DAMIANO-President/Registered Agent

rmt/jd.

enclosures.

cc:

DeoGracio Maldonado-Secretary-Treasurer