

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000018873

1. Entity Name

SURFACE SOLUTIONS OF SOUTH FLORIDA, INC.

Principal Place of Business

7667 W SAMPLE ROAD
103
CORAL SPRINGS FL 33065

Mailing Address

7667 W SAMPLE ROAD
103
CORAL SPRINGS FL 33065

2. Principal Place of Business

12209 NW 35th St.

3. Mailing Address

12209 NW 35th St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Coral Springs, FL

City & State

Coral Springs, FL

Zip

33065

Country

USA

Zip

33065

Country

Broward

4. FEI Number

65-0818404

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BAEZA, SEAN C
7154 N UNIVERSITY DR
132
TAMARAC FL 33321

7. Name and Address of New Registered Agent

Name: Baeza, Sean C
Street Address (P.O. Box Number is Not Acceptable):
12209 NW 35th St.
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, to the State of Florida.

SIGNATURE SR
Signature, typed or printed name of registered agent and title if applicable.

Sean Baeza, President

4-16-01

(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

TITLE: V
NAME: BAEZA, JUDITH
STREET ADDRESS: 12008 ROYAL PALM BLVD
CITY-ST-ZIP: CORAL SPRINGS FL 33065 ☐ Delete

TITLE: P
NAME: BAEZA, SEAN
STREET ADDRESS: 7154 N. UNIVERSITY BLVD #132
CITY-ST-ZIP: TAMARAC FL 33321 ☐ Delete

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Delete

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Delete

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Delete

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

TITLE: P
NAME: Baeza, Sean
STREET ADDRESS: 12209 NW 35th St.
CITY-ST-ZIP: Coral Springs, FL 33065 ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
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: SR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-01

Date

(954) 227-1733

Daytime Phone #

0131008

CR2E034 (10/00)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 91111 017 ***150.00

00043703



DO NOT WRITE IN THIS SPACE