## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## **FILED** DOCUMENT # P98000038036 Apr 27, 2000 8:00 am Secretary of State 1. Entity Name UNLIMITED BUSINESS CORP. 04-27-2000 90050 044 \*\*\*150.00 Mailing Address Principal Place of Business 5064 S.W. 131 AVE. 5064 S.W. 131 AVE. MIRAMAR FL 33027-5530 MIRAMAR FL 33027 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0831749 Not Applicable Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PRADO, MARTHA Street Address (P.O. Box Number is Not Acceptable) 5064 S.W. 131 AVE. MIRAMAR FL 33027 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, 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE ☐ Delete TITLE Change NAME PRADO, MARTHA NAME STREET ADDRESS STREET ADDRESS 5064 S.W. 131 AVE. CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL 33027 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME PRADO, MARTHA PAULA NAME STREET ADDRESS STREET ADDRESS 5064 S.W. 131 AVE. CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL 33027 ☐ Change ☐ Addition TITLE ☐ Delete PRADO, AGUSTIN NAME NAME STREET ADDRESS STREET ADDRESS 5064 S.W. 131 AVE. CITY-ST-ZIE CITY-ST-ZIP MIRAMAR FL 33027 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME PRADO, URSULA STREET ADDRESS STREET ADDRESS 5064 S.W. 131 AVE. CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL 33027 ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE 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.