

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000059993

1. Entity Name

DOMEQ CORPORATION

**FILED**  
**Jan 19, 2000 8:00 am**  
**Secretary of State**

01-19-2000 90082 018 \*\*\*150.00

Principal Place of Business

Mailing Address

12117 GLENMORE DRIVE  
CORAL SPRINGS FL 33071

12117 GLENMORE DRIVE  
CORAL SPRINGS FL 33065-1594

2. Principal Place of Business

4155 NW 100 AVE

3. Mailing Address

4155 NW 100 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

CORAL SPRINGS, FL

City & State

CORAL SPRINGS, FL

4. FEI Number

65-0851013

Applied For

Not Applicable

Zip

Country

33065-1594 USA

Zip

Country

33065-1594 USA

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

DOMEQ, JUAN CARLOS  
12117 GLENMORE DRIVE  
CORAL SPRINGS FL 33071

Name DOMEQ, JUAN CARLOS

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

4155 NW 100 AVE

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

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 \$150.00**  
**After MAY 1, 2000 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 PST ☐ Delete  
NAME DOMEQ, JUAN C  
STREET ADDRESS 12117 GLENMORE DRIVE  
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 4155 NW 100 AVE  
CITY-ST-ZIP CORAL SPRINGS, FL 33065-1594

TITLE V ☐ Delete  
NAME DOMEQ, MALCOLM F  
STREET ADDRESS 12117 GLENMORE DRIVE  
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 4155 NW 100 AVE  
CITY-ST-ZIP CORAL SPRINGS, FL 33065-1594

TITLE ☒ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ 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 of Juan Carlos Domeq* **DEQUIRE** **JOAN CARLOS DOMEQ** 1/9/2000 (954)757-1666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)