

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000070759

1. Entity Name

REMM MANAGEMENT SERVICES, INC.

FILED
Aug 28, 2000 8:00 am
Secretary of State

08-28-2000 90061 021 ***150.00

Principal Place of Business

12861 SW 74 STREET
MIAMI FL 33183

Mailing Address

12861 SW 74 STREET
MIAMI FL 33183

2. Principal Place of Business

3. Mailing Address

P.O. Box 832809

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
MIAMI FL

4. FEI Number

65-0789158

Applied For

Not Applicable

Zip

Country

Zip

Country

33283

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

RODRIGUEZ, MIGUEL
12861 SW 74 STREET
MIAMI FL 33183

Name

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

City

FL

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

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 ☐ Delete
NAME D
STREET ADDRESS RODRIGUEZ, MIGUEL
CITY-ST-ZIP 12861 SW 74 STREET
MIAMI FL 33183

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

Miguel Rodriguez

EQUIR

Miguel Rodriguez

8/21/00

305-971-3700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

Attachment
P98000070755
D0082180

REMM MANAGEMENT SERVICES, INC.
P.O. BOX 832809
MIAMI, FL 33283

July 11, 2000

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314


Re: Remm Management Services, Inc. TIN # 65-0789158

To Whom it May Concern:

Please find enclosed our check # 2233 in the amount of \$ 150.00 for the 2000 Annual Report. We are submitting payment without the report because we never received it.

Thank you for your cooperation in resolving this matter.

Sincerely,


Miguel Rodriguez
President