

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000076504

1. Entity Name

ISAIS HOLDING CORP.

R

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90013 032 ***163.75

Principal Place of Business

14837 BALGOWAN RD. #202
MIAMI LAKES FL 33016

Mailing Address

14837 BALGOWAN RD. #202
MIAMI LAKES FL 33016

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0861028

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

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\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PILOTO, OLGA
14837 BALGOWAN RD. #202
MIAMI LAKES FL 33016

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)

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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.

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\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	PILOTO, OLGA	
STREET ADDRESS	14837 BALGOWAN RD. #202	
CITY-ST-ZIP	MIAMI LAKES FL 33016	
TITLE	VS	<input type="checkbox"/> Delete
NAME	PILOTO, ISIS	
STREET ADDRESS	14837 BALGOWAN RD. #202	
CITY-ST-ZIP	HIALEAH FL 33016	
TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

OLGA PILOTO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/5/00
Date

305-412-2840
305-556-8593
Daytime Phone #

CR2E034 (5/00)

ATTACHMENT
P98000076504
A0067291

Isais Holding Corp.
14837 Balgowan Road unit 202-6
Miami Lakes, Florida 33016

July 12, 2000

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

Dear Gentleman/Madam:

Per my conversation with your representative, please accept my check for \$150.00 without a penalty. I did not receive your notification before May 1st and I was under the impression that this was due on August 15th.

I am sorry about this mistake and I have made a note for next year.

Cordially,



Isis Piloto
Vice-President