

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000078637

1. Entity Name

AD & RD, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90154 035 ***150.00

Principal Place of Business

Mailing Address

2264 NORTHWEST 87 AVENUE
MIAMI FL 33172

2264 NORTHWEST 87 AVENUE
MIAMI FL 33172-2414

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0590482

Applied For

Not Applicable

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

DIPU, JBANGIMAL
2264 NW 87 AVE
MIAMI FL 33172

Name SONIA D. JHANGIMAL

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

2264 NW 87TH AVE

City MIAMI

FL

Zip Code 33172

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

Sonia D. Jhangimal
Signature, typed or printed name of registered agent and title if applicable.

SONIA D. JHANGIMAL

04-25-00

(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.

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
NAME

STREET ADDRESS
CITY-ST-ZIP

PSTD
JHANGIMAL, SONIA
2264 NORTHWEST 87 AVENUE
MIAMI FL 33172

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ 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:

Sonia D. Jhangimal

SONIA D. JHANGIMAL

04-25-00

305-591-0103

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)