

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90247 047 ***158.75

DOCUMENT # **R.98000095560**

1. Entity Name

SAINT FRANCIS Breeding and Boarding Kennels, INC.

Principal Place of Business

Mailing Address

**3780 West Flagler St.
 Miami, Florida 33134**

2. Principal Place of Business

3. Mailing Address

3780 West Flagler St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL 33134

City & State

4. FEI Number

65-089 4069

Applied For

Not Applicable

Zip

33134

Country

DADE, USA

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ELSO, J.C.

**3780 West Flagler Street
 Miami, FL 33134**

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 fee, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

(No changes)

4/27/01

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, 2001 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	LLORCA de ELSo, MARIA C. <input type="checkbox"/> Delete
NAME	
STREET ADDRESS	3780 West Flagler Street PSD
CITY - ST - ZIP	MIAMI, FL 33134
TITLE	ELSo, George I. <input type="checkbox"/> Delete
NAME	
STREET ADDRESS	3780 West Flagler Street VCD
CITY - ST - ZIP	MIAMI, FL 33134
TITLE	ELSo, Christopher L. <input type="checkbox"/> Delete
NAME	
STREET ADDRESS	3780 West Flagler Street VTD
CITY - ST - ZIP	MIAMI, FL 33134
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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

(Signature)

4/27/01