

UNIFORM BUSINESS REPORT (UBR)

10/2

DOCUMENT # P99000005178

1. Entity Name

SEGARRA CONSULTANTS, INC.

FILED

00 NOV -3 PM 2:59

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

Mailing Address

8540 S.W. 123rd Street
Miami, FL 33156

8540 S.W. 123rd Street
Miami, FL 33156

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip

Country

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

SEGARRA, LEONARD J.
8540 S.W. 123rd Street
Miami, FL 33156

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 re-registering)

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

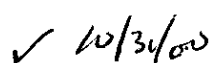
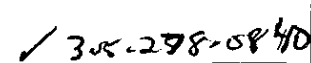
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D SEGARRA, LEONARD J 8540 S.W. 123rd Street Miami, FL 33156	<input type="checkbox"/>	 	<input type="checkbox"/>
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-11/21/00-01087-015
****150.00 Change ****150.00 Addition

KE

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

 10/31/00  305-298-0840
Date Daytime Phone #

282

SEGARRA CONSULTANTS, INC.
8540 S.W. 123rd Street
Miami, FL 33156

October 30th, 2000

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: *Segarra Consultants, Inc.*
Document #P99000005178
2000 Profit Corporation Annual Report

Gentlemen:

Enclosed find our 2000 Annual Report and our \$150.00 check for the filing fee.

Please be advised that it is the policy of our company to pay all bills upon receipt. Consequently if this has not been paid we undoubtedly never received it.

We apologize for any inconvenience and thank you for your cooperation in this matter.

Sincerely,



Mr. Léonard J. Segarra
President