

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2003 8:00 am
Secretary of State

01-30-2003 90163 021 ***150.00

DOCUMENT # **P99000007398**

1. Entity Name

A.S.A.P. BONDING, INC.



Principal Place of Business
% REGINA ANNE DANTE-PERU
1501A NW 14TH ST.
MIAMI FL 33125

Mailing Address
PO BOX 292215
DAVIR FL 33329
US



2. Principal Place of Business

1505 NW 14TH St.

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 292215

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

Miami, FL

City & State

DAVIE, FL

4. FEI Number

65-0890586

Applied For

Not Applicable

Zip

33125

Country

US

Zip

33329

Country

US

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

RUTECKI, HEATHER A ESQ.
100 S.E. 2ND ST. TE-PERU
34TH FLOOR
MIAMI FL 33131

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **DANTE-PERU, REGINA**
STREET ADDRESS **1501A NW 14TH ST.**
CITY-ST-ZIP **MIAMI FL 33125**

TITLE **D** ☐ Delete
NAME **PERU, MANUEL**
STREET ADDRESS **1501A NW 14TH ST.**
CITY-ST-ZIP **MIAMI FL 33125**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1505 N.W. 14 ST**
CITY-ST-ZIP **MIAMI, FL 33125**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1505 NW 14 ST**
CITY-ST-ZIP **MIAMI, FL 33125**

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Regina Dante-Peru

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/03

Date

305/325/8300

Daytime Phone #

CR2E034 (10/02)