

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000008102

1. Entity Name
THE AGUILAR CORPORATION



FILED
Sep 13, 2000 8:00 am
Secretary of State

09-13-2000 90059 009 ***150.00

Principal Place of Business
6655 S.W. 125TH AVENUE
MIAMI FL 33183

Mailing Address
6655 S.W. 125TH AVENUE
MIAMI FL 33183

ADU17034



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0891341

Applied For

Not Applicable

Zip

Country

Zip

Country

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

AGUILAR, ANGEL OSCAR
6655 S.W. 125TH AVENUE
MIAMI FL 33183

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) ☐

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. ☐

\$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
D
AGUILAR, ANGEL OSCAR
6655 S.W. 125TH AVENUE
MIAMI FL 33183 ☐ Delete

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

TITLE
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CITY-ST-ZIP ☐ Delete

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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:

SIGNATURE (OR TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Daytime Phone #

SIGNATURE: ANGEL AGUILAR

9-8-00

305-412-1814

CR2E034 (5/00)

Attachment
99000008102
A0077692

The Aguilar Corporation Inc.

6655 S.W. 125 Avenue
Miami, Florida 33183

September 8, 2000


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

Reference Document # P99000008102

To Whom it may concern:

I am in receipt of the second notice, File now 2000 uniform business report. This is the first notice that I have received for the renewal of the corporation. I had never received, the first notice for the corporation filing. Please I ask that you review this application and please abate the \$ 400.00 penalty for which I am being charged with. As a first time corporation owner I never knew of the report filings please review my request. Enclosed please find my check for \$ 150.00 for the corporation filing.

Thank you


Angel Aguilar
President