

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Sep 07, 2000 8:00 am**  
**Secretary of State**

09-07-2000 90060 019 \*\*\*158.75

**DOCUMENT # P99000008574**

1. Entity Name

**COL-MART INTERNATIONAL SERVICES CO.**

*P*

Principal Place of Business

**7392 NORTHWEST 35TH TERRACE  
SUITE 205  
MIAMI FL 33122**

Mailing Address

**7392 NORTHWEST 35TH TERRACE  
SUITE 205  
MIAMI FL 33122**

2. Principal Place of Business

**9628 S.W. 151 Ave.**

3. Mailing Address

**9628 SW 151 Ave**

Suite, Apt. #, etc.

**1**

Suite, Apt. #, etc.

City & State

**MIAMI, FLORIDA**

City & State

**MIAMI, FLORIDA**

4. FEI Number

**65-0892029**

Applied For

Not Applicable

Zip

**33196**

Country

**USA**

Zip

**33196**

Country

**USA**

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134**

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.

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**PSTD  
RICO, JORGE E  
7392 NORTHWEST 35TH TERRACE  
MIAMI FL 33122**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (500)

Attachment doc #  
D99000008574  
A0075583

Miami, Florida  
September 1, 2000

UNIFORM BUSINESS REPORT  
DIVISION OF CORPORATIONS  
P.O. BOX 1500  
Tallahassee, Fl. 32302-1500

Gentlemen:

As per telephone conversation , I am herewith sending you the  
check for \$150.00 along with the Uniform Business Report Form.  
As explained, the first notice of this was never received.  
Thank you for your kind attention. (also enclosed is \$8.75 for  
the Certificate of Status).

Thank you again for your kind attention,

JORGE E. RICO

COL-MART INTERNATIONAL SERVICES, I..

A large, stylized handwritten signature in black ink, appearing to read 'Jorge E. Rico', is written over a horizontal line.