

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000008873

1. Entity Name

IBANEZ ENTERPRISES, INC.

Principal Place of Business

Mailing Address

6088-A LAUREL LANE
TAMARAC, FL. 33319

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc

Suite, Apt. #, etc

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0892581

Applied For

Not Applied

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

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)

9-03-00

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
IBANEZ, Alejandro
6088-A Laurel Lane
Tamarac, FL. 33319



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



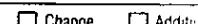
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



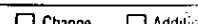
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



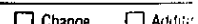
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



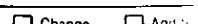
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



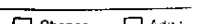
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
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 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

9-03-00

attachment
P99 00008873
B0105780

IBANEZ ENTERPRISES, INC

September 3, 2000

Florida Department of State
Division of Corporation
409 East Gaines Street
Tallahassee, Fl. 32399

Re: 2000 uniform Business Report for
IBANEZ ENTERPRISES, INC.

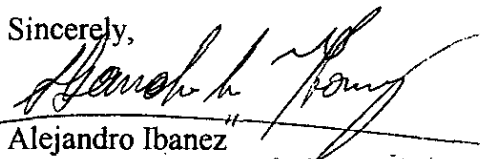
To Whom It May Concern:

This letter is to inform you that the above referenced corporation never received the 2000 UBR prior this date.

We are enclosing a check 5883 from First Union National Bank for the amount of One Hundred and Fifty Dollars (\$150.00) for the renewal fee for this year and the 2000 UBR form.

Please update your records and if you have further instructions, let us know via mail to our corporate address. We would appreciate your help in this matter.

Sincerely,



Alejandro Ibanez
President of Ibanez Enterprises, Inc.

AI/nb

Enclosures (2)