

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000012248

1. Entity Name

IFM, INC.

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90191 017 ***150.00

Principal Place of Business

Mailing Address

HATCHER CIRCLE
ORLANDO FL 32824

11807 HATCHER CIRCLE
ORLANDO FL 32824-8788

2. Principal Place of Business

3. Mailing Address

292 INDIAN POINT CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

ORLANDO, FLORIDA

City & State

City & State

34746 USA

Zip

Country

Zip

Country

4. FEI Number

59-356-3498

Applied For

Not Applicable

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

MOZO, FRANCISCO F

11807 HATCHER CIRCLE

ORLANDO FL 32824

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 \$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 D
NAME MOZO, MARIA ISABEL F
STREET ADDRESS 2 ARANET AVE., COOLOOCAN CITY
CITY-ST-ZIP MANILA PHILLIPINES

☐ Delete

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

TITLE D
NAME MOZO, FRANCISCO F
STREET ADDRESS 11807 HATCHER CIRCLE
CITY-ST-ZIP ORLANDO FL 32824

☐ Delete

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

TITLE D
NAME MOZO, FLORIDA A
STREET ADDRESS 11807 HATCHER CIRCLE
CITY-ST-ZIP ORLANDO FL 32824

☐ Delete

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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: *Francisco F. Mozo* FRANCISCO F. MOZO

4/26/00

407-438-5825

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)