

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000015948

1. Entity Name

M.I.S. INC. MAINTENANCE & CLEANING

**FILED**  
**May 19, 2000 8:00 am**  
**Secretary of State**

05-19-2000 90086 044 \*\*\*150.00

Principal Place of Business

Mailing Address

351 NW 82ND AVE.  
#1111  
MIAMI FL 33126

351 NW 82ND AVE.  
#1111  
MIAMI FL 33126-8347

2. Principal Place of Business

3. Mailing Address

7575 WEST FLAGLER

7575 WEST FLAGLER

Suite, Apt. #, etc.

Suite, Apt. #, etc.

202-A

202-A

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33144

Country

DADE

Zip

33144

Country

DADE



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0902404

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

MARTINEZ, IVAN  
351 NW 82ND AVE.  
#1111  
MIAMI FL 33126

Name  
IVAN MARTINEZ

Street Address (P.O. Box Number is Not Acceptable)

7575 WEST FLAGLER

SUITE 202-A

City  
MIAMI

FL

Zip Code  
33144

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]*

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

(NOTE: Registered Agent signature required when reinstating)

04/25/00  
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  
MARTINEZ, IVAN  
351 NW 82ND AVE.  
MIAMI FL 33126 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VSD  
SLOVACEVICH, NADIA  
351 NW 82ND AVE.  
MIAMI FL 33126 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/25/00  
Date

Daytime Phone #

CR2E034 (9/99)