

2000 UNIFORM BUSINESS REPORT (UBR)

bf2

DOCUMENT # P99000020625

1. Entity Name

OXI-J-REPAIRS & PARTS INC.

FILED

00 SEP 28 AM 10:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

11136 SYLVAN POND CR.
ORLANDO FL 32825

Mailing Address

11136 SYLVAN POND CR.
ORLANDO FL 32825

2. Principal Place of Business

11136 SYLVAN POND CR.
Suite, Apt. #, etc.

3. Mailing Address

11136 SYLVAN POND CR.
Suite, Apt. #, etc.

City & State

ORL FL 32825

City & State

ORL FL 32825

4. FEI Number

59-3569654

Applied For

Not Applicable

Zip

Country

ORANGE

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

8. Name and Address of Current Registered Agent

ZABALA, JOE L
2212 SO. CHICKASAW TR., STE. 219
ORLANDO FL 32825-8414

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

9. 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) ☐

FREE 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 PD
NAME ZABALA, JOE L
STREET ADDRESS 1198 OROPESA AVE.
CITY-ST-ZIP ORLANDO FL 32825 ☐ Delete

TITLE STD
NAME ZABALA, MYRTE
STREET ADDRESS 1198 OROPESA AVE.
CITY-ST-ZIP ORLANDO FL 32825 ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE ☐ Change ☐ Addition
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 REQUIRED

Joe L. Zabala 8/21/2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

2082

To: Florida Department of State from: OXI-J-REPAIRS&PARTS INC. We Respectfully Request that the penalty fee for late filing of the 2000 uniform business report (UBR) is waive due to the fact that we never received the first notice of the 2000 UBR. Included are a check for \$150.00 and our FEI number. We hope this will fulfill the requirements of the Florida Department of State for the above-mentioned report. Sincerely, Joe E. Zabel OXI-J-REPAIRS&PARTS