

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000022952

1. Entity Name

BUYING POWER PURCHASING AGENCY, INC.

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90071 028 ***150.00

Principal Place of Business

1281 NW 184 TERRACE
PEMBROKE PINES FL 33029

Mailing Address

1281 NW 184 TERRACE
PEMBROKE PINES FL 33029-4701

2. Principal Place of Business

5791 Plunkett St
Suite, Apt. #, etc.
#3

3. Mailing Address

5791 Plunkett St
Suite, Apt. #, etc.
#3



DO NOT WRITE IN THIS SPACE

City & State

Hollywood FL

City & State

Hollywood FL

4. FEI Number

65-091616J

Applied For

Not Applicable

Zip

33023

Country

USA

Zip

33023

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PAZMINO, EDUARDO
1281 NW 184 TERRACE
PEMBROKE PINES FL 33029

7. Name and Address of New Registered Agent

Name

PAZMINO, EDUARDO

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

5791 PLUNKETT ST #3

City

HOLLYWOOD

FL

Zip Code

33023

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

EDUARDO PAZMINO

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

(NOTE: Registered Agent signature required when reinstating)

DATE

EdUARDO PAZMINO

3/12/2000

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

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VICE PRESIDENT.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MIRYAN PAZMINO	
STREET ADDRESS	1281 NW 184 TERR.	
CITY-ST-ZIP	PEMBROKE PINES FL 33029	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

EDUARDO PAZMINO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/12/2000