

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000024854

1. Entity Name

TAINO MANAGEMENT SERVICES, INC.

**FILED**  
**Sep 07, 2000 8:00 am**  
**Secretary of State**

09-07-2000 90060 002 \*\*\*550.00

Principal Place of Business

7744 PETERS ROAD SUITE 162  
PLANTATION FL 33324-4004

Mailing Address

7744 PETERS ROAD SUITE 162  
PLANTATION FL 33324-4004

2. Principal Place of Business

7744 Peters Rd

Suite, Apt. #, etc.

#162

City & State

PLANTATION FL

Zip

33324

Country

U.S.

3. Mailing Address

7744 Peters Rd

Suite, Apt. #, etc.

#162

City & State

PLANTATION FL

Zip

33324

Country

U.S.

4. FEI Number

65-0901025

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MCBEAN, NICOLENE  
1391 SW 82ND AVE  
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Tony Pesando

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

7758 NW 44 ST

City

SUNRISE

FL

Zip Code

33351

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

*Antonio Pesando Jr.*  
Signature, typed or printed name of registered agent and title if applicable.

Antonio Pesando Jr.

(NOTE: Registered Agent signature required when reinstating)

8/29/00

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 \$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 D  
NAME MCBEAN, NICOLENE  
STREET ADDRESS 1391 SW 82ND AVE  
CITY-ST-ZIP PLANTATION FL 33324 ☒ Delete

TITLE D  
NAME OJEDA, JOSE M JR  
STREET ADDRESS 1391 SW 82ND AVE  
CITY-ST-ZIP PLANTATION FL 33324 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE D  
NAME Ojeda, Jose M Jr  
STREET ADDRESS 5231 SW 18 ST  
CITY-ST-ZIP Plantation, FL 33327 ☒ Change ☐ Addition

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

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

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

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: NICOLENE MCBEAN*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9-1-00

Daytime Phone #

954-579-479

CR2E034 (5/00)