

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P 99000027328

1. Entity Name

CYBERTEK ENGINEERING SERVICES, INC.,

FILED

00 APR -4 AM 10: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

11 SW 113 AVENUE #103
MIAMI, FLORIDA 33174

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0913863

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EMIGDIO E. PRADO
11 SW 113 AVENUE #103
MIAMI, FLORIDA 33174

Name EMIGNIO E. PRADO

Street Address (P.O. Box Number is Not Acceptable)
11 SW 113 AVENUE #103

City MIAMI

FL

Zip Code 33174

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

03-30-2000

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME PRESIDENT
STREET ADDRESS MARIA PRADO
CITY-ST-ZIP 11 SW 113 AVENUE #103
MIAMI, FLORIDA 33174

TITLE ☐ Delete
NAME VICE PRESIDENT
STREET ADDRESS CARLOS CUEVAS
CITY-ST-ZIP 4528 SW 143 PL EAST
MIAMI, FLORIDA 33175

TITLE ☐ Delete
NAME VICE PRESIDENT
STREET ADDRESS EMIGDIO E. PRADO
CITY-ST-ZIP 11 SW 113 AVENUE #103
MIAMI, FLORIDA 33174

TITLE ☐ Delete
NAME SECRETARY
STREET ADDRESS ELSIE A. PRADO
CITY-ST-ZIP 11 SW 113 AVENUE #103
MIAMI, FLORIDA 33174

TITLE ☐ Delete
NAME TREASURER
STREET ADDRESS ALEXANDRA CUEVAS P
CITY-ST-ZIP 4528 SW 143 PL EAST
MIAMI, FLORIDA 33175

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME 100003203681--5
STREET ADDRESS -04/11/00--01087--020
CITY-ST-ZIP ****150.00 ****150.00

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

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

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

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

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice-President

03-30-2000

Date

(305) 559-1476

Daytime Phone #