## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **P99000028266** Sep 05, 2000 8:00 am Secretary of State 1. Entity Name SOSA'S, INC. 09-05-2000 90038 004 \*\*\*150.00 Principal Place of Business Mailing Address 9241 WEST SUNRISE BLVD. 9241 WEST SUNRISE BLVD. PLANTATION FL 33322 PLANTATION FL 33322 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-090815 Not Applicable Žip Country \$8.75 Additional 5. Certificate of Status Desired Fee:Required .\_ 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SOSA, JEANNETTE B Street Address (P.O. Box Number is Not Acceptable) 9241 WEST SUNRISE BLVD. **PLANTATION FL 33322** City Zip Code 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 FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete Addition TITLE TITLE Change SOSA, JEANNETTE B NAME NAME 9241 WEST SUNRISE BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 33322 **PVST** ☐ Delete ☐ Addition ☐ Change SOSA, JEANNETTE B NAME NAME STREET ADDRESS 9241 WEST SUNRISE BLVD. STREET ADDRESS CITY-ST-7IP CITY-ST-7IP PLANTATION FL 33322 ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS City-St-7IF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

Eannette B. Sose Proider

## attachment # P9900028266 DW83497

August 31, 2000 Florida Department of State Division of Corporations

I'm sorry I did not filed before May 1, 2000 because I just receive the second notice. So please accept the report at this time with \$1.50 So, I can stay in business.

I ensure four that I'll be more carefully and call by April 2001 if I don't receive the report on time.

Thankfour for you Cooparation.

Sincerely,

Jeannette Sosa (President) Sosa's Inc.