

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 17, 2002 8:00 am
Secretary of State

07-17-2002 90141 023 ***150.00

DOCUMENT # P99000030836

1. Entity Name
ALBERTO M. CALVO, P.A.

Principal Place of Business Mailing Address
6278 N FEDERAL HWY **13899 BISCAYNE BLVD.**
291 **SUITE 107**
FT LAUDERDALE FL 33308 **MIAMI FL 33181**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

13899 Biscayne Blvd

Suite, Apt. #, etc.
Suite 107

City & State
MIAMI, FL 33181

Zip Country
33181 USA

4. FEI Number Applied For
65-0908592 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CALVO, ALBERTO M
13899 BISCAYNE BLVD.
SUITE 107
MIAMI FL 33181

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Alberto M. Calvo

7/12/02

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)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	CALVO, ALBERTO M	
STREET ADDRESS	13899 BISCAYNE BLVD. STE 107	
CITY-ST-ZIP	MIAMI FL 33181	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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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:

Alberto M. Calvo
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/12/02
 Date

Daytime Phone #

CR2E034 (4/02)

Attachment

Alberto M. Calvo, P.A.

Corporate and Professional Immigration

July 15, 2002

Florida Department of State
Division of Corporations
Uniform Business Report
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: Uniform-Business Report

Document # P99000030836

1675177

Dear Sir or Madam,

Attached, please find an executed Uniform Business Report, ("UBR"), and the filing fee of US\$150.00.

This year, we did not receive the UBR application before May, as it is customary. We received only the late notice advising us that we had missed the original filing deadline. Please consider this and accept the original filing fee of US\$150.00.

If you have any questions, please do not hesitate to call or write,

Thanking you in advance for your understanding,



Alberto M. Calvo
For the Firm