

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000036306

1. Entity Name
ARCHITECTURE DESIGN REPRODUCTION, INC.

FILED
Sep 06, 2000 8:00 am
Secretary of State

04-27-2000 90079 005 ***150.00

Principal Place of Business

3315 SW 97 AVE
MIAMI FL 33165

Mailing Address

3315 SW 97 AVE
MIAMI FL 33165

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-091-5107

Applied For

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

BLASCO, VIVIAN
3315 SW 97 AVE
MIAMI FL 33165

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.

SIGNATURE

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*PRESIDENT
VIVIAN BLASCO
3315 SW 97 AVE
MIAMI FL 33165* ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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: *X*

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 15/001

DOC # P99000036306
20290

ARCHITECTURE DESIGN REPRODUCTION, INC.
3315 SW 97TH AVE.
MIAMI FL 33165

August 30, 2000

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT
P. O. BOX 1500
TALLAHASSEE, FL 32302

RE: Document # P99000036306
-Federal ID # 65-0915107-

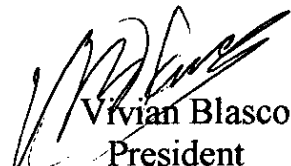
As per our phone conversation, this is to inform you that, I do not received
your May 4, 2000 letter.

Enclose is photocopy of check # 92 dated 4-20-00 and deposited by your
Department on 4-26-00, for the amount of \$150.00, for the 2000 Uniform
Business Report (UBR) fee.

Please find also 2000 Uniform Business Report Form, with # 4, and # 11
Complete.

If you have any questions please contact me.

Truly yours


Vivian Blasco
President

Doc # P99000036306
20290

ARCHITECTURE DESIGN REPRODUCTION, INC.

40048015

92

63-643/670

DATE 4/20/00

PAY TO THE
ORDER OF

DEPARTMENT OF STATE

\$

1500

One hundred fifty 00

DOLLARS

Security features
included
Circle on back



First Union National Bank

R/T 067006432

FOR Document P99000036306

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Signature lines and Security Strip (back of this document)
Absence of these features may indicate alteration.

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FOR DEPOSIT ONLY
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