

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000040527

1. Entity Name

CDY SERVICES INC.

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90190 031 ***150.00

Principal Place of Business

18160 S.W. 142 PLACE
MIAMI FL 33177

Mailing Address

18160 S.W. 142 PLACE
MIAMI FL 33177-7619

2. Principal Place of Business

17820 SW 149 AVE

3. Mailing Address

17820 SW 149 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-0918-893

Applied For

Not Applicable

Zip

Country

33187

Zip

Country

33187

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

IBANEZ, DANIEL
12260 S.W. 8 STREET
MIAMI FL 33184

7. Name and Address of New Registered Agent

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 \$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

TITLE ☐ Delete
NAME D
STREET ADDRESS IBANEZ, DANIEL
CITY-ST-ZIP 18160 S.W. 142 PLACE
MIAMI FL 33177

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME President
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
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STREET ADDRESS
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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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

A/28/00

CDY SERVICES., INC.
17820 SW 149 Ave.
Miami, Florida 33187

Attachment
103041
#P9900004052

April 28, 2000

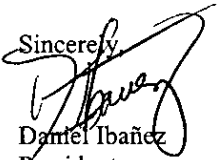
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

To Whom It May Concern:

Please excuse us for sending our Uniform business report so late, but we moved, and somehow the form was misplaced. This is a new corporation, and we were not aware that the form was due May 1, 2000. As soon as I found the form I called the toll free number, and I was told to send a letter along with the papers explaining what happened.

Again, I apologize. I can assure that this will not happen again, as I am now aware that this is due every year on the same date.

Sincerely,


Daniel Ibañez
President