

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2001 8:00 am
Secretary of State

09-17-2001 90014 037 ***550.00

DOCUMENT # P99000041837

1. Entity Name

ISRAEL & SON PAINTING CORP.

Principal Place of Business

**680 SE 3RD PLACE
HIALEAH FL 33010**

Mailing Address

**680 SE 3RD PLACE
HIALEAH FL 33010**

2. Principal Place of Business

3. Mailing Address

130 NW 87 AVE

130 NW 87 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

H 206

H 206

City & State

City & State

Miami FL

Miami FL

Zip

33172

Country

DADE

Zip

33172

Country

DADE

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0918089

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PEREZ, CARLOS I
680 SE 3RD PLACE
HIALEAH FL 33010**

7. Name and Address of New Registered Agent

Name **PEREZ CARLOS I**

Street Address (P.O. Box Number is Not Acceptable)
130 NW 87 AVE H 206

City **MIAMI**

FL

Zip Code **33172**

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

Carlos Perez

CARLOS ISRAEL PEREZ President 9/6/01

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 12, 2001 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

TITLE **D** ☐ Delete
NAME **PEREZ, CARLOS I**
STREET ADDRESS **680 SE 3RD PLACE**
CITY-ST-ZIP **HIALEAH FL 33010**

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 **D** ☒ Change ☐ Addition
NAME **PEREZ, CARLOS I**
STREET ADDRESS **130 NW 87 AVE H 206**
CITY-ST-ZIP **MIAMI, FL 33172**

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

TITLE ☐ Change ☐ Addition
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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: *Carlos Perez*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/6/01

Date

(305) 229-2666

Daytime Phone #

CR2E034 (5/01)