

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90135 049 ***158.75

DOCUMENT # **P99000042174**

1. Entity Name

TAMIAMI KENDALL INVESTMENTS, INC.

Principal Place of Business

Mailing Address

7050 S.W. 86th Avenue
Miami, Florida 33143

2. Principal Place of Business

7050 S.W. 86th Av.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

4. FEI Number

65-0962434

Applied For

Not Applicable

Zip

33143

Country

U.S.A.

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

B0039052

6. Name and Address of Current Registered Agent

Alberto J. Parlade, Esquire
7050 S.W. 86th Av.
Miami, FL 33143

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: **PSTD**
 NAME: **Vinas, Robert**
 STREET ADDRESS: **3850 S.W. 87th Av., #207**
 CITY-ST-ZIP: **Miami, FL 33165**

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: **PSTD**
 NAME: **Vinas, Robert**
 STREET ADDRESS: **7050 S.W. 86th Av.**
 CITY-ST-ZIP: **Miami, FL 33143**

☒ Change ☐ Addition

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

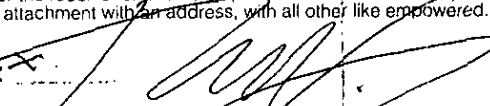
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true 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: 

Robert Vinas

3/10/00

(305) 595-2300

CR2E034 (9/99)