

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P 99000046914

Entity Name

Medical Publications, Inc

FILED

Aug 09, 2000 8:00 am
Secretary of State

08-09-2000 90076 027 ***150.00

00077547

Principal Place of Business Mailing Address
10927 NW 67 Terrace
Miami, FL 33178

Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0922872 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

Marcelo Rodriguez
10927 NW 67 Terrace
Miami, FL 33178

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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 19, 2000 Fee will be \$150.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

ST-ZIP	NAME	TITLE	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P UPT D	Rodriguez, Marcelo		10927 NW 67 Terrace	Miami, FL 33178	<input type="checkbox"/>	<input type="checkbox"/>
5	Rodriguez, Carla		10927 NW 67 Terrace	Miami, FL 33178	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

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:

Marcelo Rodriguez

8-1-00

305-904-1443

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

Attachment
of P99000046914
D007B7

CBS FINANCIAL, CPA, PA

CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

COMPREHENSIVE BUSINESS AND INDIVIDUAL FINANCIAL SOLUTIONS

July 29, 2000

Florida Department of State
Division of Corporations
Annual Reports Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Medical Publications, Inc.
Form: 2000 Uniform Business Report
Document #: P99000046914

Dear Madam/Sir,

We have been retained by the above referenced taxpayer recently.

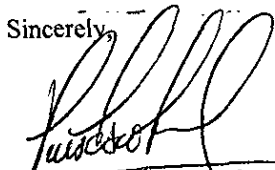
During our initial interview with the taxpayer it was discovered that they had not received the Florida's 2000 Uniform Business Report; therefore, they had not filed it. Please notice that the taxpayer has a new mailing and business address.

Please find enclosed a properly completed 2000 Uniform Business Report and taxpayer's check payable to the Florida Department of State in the amount of \$150.00.

Please abate any late filing fees or other penalties. Medical Publication, Inc. did not intended to file late. They would have filed and pay in time, if they had received the aforementioned form.

Please do not hesitate to contact our offices if you have any questions.

Sincerely,



Luis A. Escobar, Jr., CPA

Encl.: 2000 Uniform Business Report

Cc.: Medical Publications, Inc.