

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000052008

1. Entity Name

FREDY'S GABINET, INC.

FILED
Jul 18, 2000 8:00 am
Secretary of State

07-18-2000 90011 004 ***150.00

Principal Place of Business

2496 WEST 64 PLACE
HIALEAH FL 33016

Mailing Address

2496 WEST 64 PLACE
HIALEAH FL 33016

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

65-0925613

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

GARCIA, FREDY HERNANDO
2496 WEST 64 PLACE
HIALEAH FL 33016

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 ☐ Delete
NAME D GARCIA, FRED HERNANDO
STREET ADDRESS 2496 WEST 64 PLACE
CITY-ST-ZIP HIALEAH FL 33016

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/10/00 (305) 512-5056
Date Daytime Phone #

CR2E034 (5/00)

Attachment
D# 099000055008
0051397
JULY 11 2000

TO WHOM IT MAY CONCERN:

I fredy garcia president FREDY'S GABINET, INC. send my payment before May 1 me not you that I pass that you don't have it I call to my bank and they have not charged it I also went to the mail and they have not received anything.

Here I am sending the payment another alone time I ask them that if they received the other one or any question that please have they don't stop to communicate it 305 512-5098.

Sincerely,

FREDY GARCÍA (PRESIDENT)

Sworn to and subscribed before me this
11 day of July 11, 2000

by: Fredy Garcia

Signature of Notary Public

Luis R. Blanco

Notary's Name, Printed, Stamped or Typed

Personally Known or Produced ID

Type of ID produced



Luis R. Blanco
Commission # CC 758791
Expires July 13, 2002
BONDED THRU
ATLANTIC BONDING CO., INC.