

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000058896

1. Entity Name
ISASOL, CORP.

FILED
Aug 31, 2000 8:00 am
Secretary of State

08-31-2000 90004 031 ***150.00

Principal Place of Business

10133 S.W 163 COURT
MIAMI FL 33196

Mailing Address

10133 S.W 163 COURT
MIAMI FL 33196

2. Principal Place of Business

10133 SW 163 COURT

3. Mailing Address

10133 SW 163 COURT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33196

Country

USA

Zip

33196

Country

USA

4. FEI Number

05-0972067

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DACOSTA, RAFAEL
10133 S.W 163 COURT
MIAMI FL 33196

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)

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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.

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\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DP
NAME ZAPATA, ARTURO
STREET ADDRESS 10133 S.W 163 COURT
CITY-ST-ZIP MIAMI FL 33196

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ Change ☐ Addition

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

Date

Daytime Phone #

CR2E034 (5/00)

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D0082670

8/14/2000

FROM: ISASOL CORP.
10133 SW 163 rd COURT
MIAMI, FLORIDA
33196

TO: FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

The ISASOL CORP. did not received the first NOTICE of the 2000 Uniform Business Report; this is one of the reasons this corporation did not file on time. Concern of this matter we called the Division of Corporation in Tallahassee and their answer was to send \$150.00 and the complete form. We appreciated your help in this matter.

If you have any question please call ISASOL CORP. at 305-383-8667 as soon as possible.

Sincerely,

ISASOL CORP.