

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000059024

1. Entity Name  
ACCU-PROFILES, INC.

Principal Place of Business  
3103 WEST PARIS STREET  
TAMPA FL 33614

Mailing Address  
3103 WEST PARIS STREET  
TAMPA FL 33614

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Fee Number

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

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

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 PSTD  
NAME SUAREZ, VILMA D  
STREET ADDRESS 3103 WEST PARIS STREET  
CITY-ST-ZIP TAMPA FL 33614 ☐ Delete

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

TITLE VD  
NAME SUAREZ, CARLOS W  
STREET ADDRESS 3103 WEST PARIS STREET  
CITY-ST-ZIP TAMPA FL 33614 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**FILED**  
**Aug 11, 2000 8:00 am**  
**Secretary of State**

08-11-2000 90053 017 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (5/00)

Attachment  
DH# 09900059024  
DW78364

To Whom It May Concern,

I have called your office and spoken to a representative who siad to mail in 150.00 with the attached application because of the problem I explained to him.

I have never received a first notice and I was unaware of the procedures involved with incorporating as this is a home based business that has never been operating.

The mail was sent to East Paris and I finally got it this week at West Paris. I believe this is the reason I never received the first one.

I intend to try to work on this home based business in the fall so I do not want the corporation to be dissolved.

Enclosed is the check for 150.00 to keep the corporation active.

Thank You,

Vilma Svarov  
Accu-Profiles, Inc.  
3103 W. Paris St  
Tampa, FL 33614  
813-877-6179