2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 30, 2000 8:00 am
Secretary of State

06-12-2000 90040 022 ***150.00
08-30-2000 90002 048 ***400.00

[redacted]

DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000061359

1. Entity Name
NORMAN DE LA PAZ CARPENTRY, CORP.

Principal Place of Business	Mailing Address
5078 N.W. 195 LN. CAROL CITY FL 33055	5078 N.W. 195 LN. CAROL CITY FL 33055

2. Principal Place of Business	3. Mailing Address
15990 NW 45 AVENUE	15990 NW 45 AVENUE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI, FL	City & State: MIAMI, FL
Zip: 33154 — Country: DADE	Zip: 33154 — Country: DADE

4. FEI Number: 65-0933172 ☐ 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
DE LA PAZ, NORMAN 5078 N.W. 195 LN. 15990 NW 45 AVENUE CAROL CITY FL 33055 MIAMI, FL 33154	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 NAME STREET ADDRESS CITY-ST-ZIP	PD DE LA PAZ, NORMAN 5078 N.W. 195 LN. CAROL CITY FL 33055 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DE LA PAZ NORMAN 15990 NW 45 AVENUE MIAMI, FL 33154 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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

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 08-19-00 305-620-9800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (5/00)

attachment A-P99000061359 [redacted] B0104790

2000 UNIFORM BUSINESS REPORT (UBR)

082300

0161025

DOCUMENT # P99000061359

1. Entity Name

NORMAN DE LA PAZ CARPENTRY, CORP.

Principal Place of Business	Mailing Address
5078 N.W. 195 LN. CAROL CITY FL 33055	5078 N.W. 195 LN. CAROL CITY FL 33055-2071

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
15990 NW 45 AVENUE	15990 NW 45 AVENUE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI, FL	City & State: MIAMI, FL
Zip: 33154 / Country: DADE	Zip: 33154 / Country: DADE

4. FEI Number 65-0933172 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

DE LA PAZ, NORMAN
5078 N.W. 195 LN. 15990 NW 45 AVENUE
CAROL CITY FL 33055 MIAMI, FL 33154

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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DE LA PAZ, NORMAN 5078 N.W. 195 LN. CAROL CITY FL 33055 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DE LA PAZ NORMAN 15990 NW 45 AVENUE ~~MIAMI, FL 33154~~ ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/99)

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SIGNATURE: x Norman de la Paz 08-19-00 305-620-9800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

attachment # P99000061359

2000 UNIFORM BUSINESS REPORT (UBR)

6/12/00-90040-022-$150.00-$150.00

B0104790

082300

DOCUMENT # P99000061359

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NORMAN DE LA PAZ CARPENTRY, CORP.

Principal Place of Business
5078 NW 195 LN
CAROL CITY, FL 33055

Mailing Address
5078 NW 195 LN
CAROL CITY, FL 33055

[redacted]

2. Principal Place of Business
15990 NW 45 AVENUE
Suite, Apt #, etc.
City & State MIAMI, FL
Zip 33154
Country DADE

3. Mailing Address
15990 NW 45 AVENUE
Suite, Apt #, etc
City & State MIAMI, FL
Zip 33154
Country DADE

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4. FEI Number 65-0933172 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
DE LA PAZ NORMAN
15990 NW 45 AVENUE
MIAMI, FL 33154

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number Is Not Acceptable)
City FL Zip Code

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SIGNATURE ______ DATE

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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 PD NAME DE LA PAZ NORMAN STREET ADDRESS 5078 NW 195 LN CITY-ST-ZIP CAROL CITY, FL 33055 ☐ Delete	TITLE PD ☐ Change ☐ Addition NAME DERLA PAZ NORMAN STREET ADDRESS 15990 NW 45 AVENUE CITY-ST-ZIP ~~MIAMI, FL 33154~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ 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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SIGNATURE: Norman De La Paz 05-25-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment # P99000061359 B0104790

082300

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000061359

Entity Name

NORMAN DE LA PAZ CARPENTRY, CORP.

Mailing Address

5078 NW 195 LN
CAROL CITY, FL 33055

5078 NW 195 LN
CAROL CITY, FL 33055

Principal Place of Business
15990 NW 45 AVENUE
Suite, Apt #, etc
City & State
MIAMI, FL
Zip 33154 Country DADE

3. Mailing Address
15990 NW 45 AVENUE
Suite, Apt #, etc
City & State
MIAMI, FL
Zip 33154 Country DADE

DO NOT WRITE IN THIS SPACE

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

6. Name and Address of Current Registered Agent

LA PAZ NORMAN
15990 NW 45 AVENUE
MIAMI, FL 33154

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

... 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

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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

OFFICERS AND DIRECTORS

PD
DE LA PAZ NORMAN
5078 NW 195 LN
CAROL CITY, FL 33055 ☐ Delete

☐ Delete

☐ Delete

☐ Delete

☐ Delete

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Change ☐ Addition
NAME DE LA PAZ NORMAN
STREET ADDRESS 15990 NW 45 AVENUE
CITY-ST-ZIP ~~MIAMI, FL 33154~~

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

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

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SIGNATURE: Norman De La Paz 05-25-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment Doc #
P99000061359
B0104790

NORMAN DE LA PAZ
JACQUELINE R. DE LA PAZ
5078 N.W. 195TH LANE
CAROL CITY, FL 33055
305-620-6591

2000 UNIFORM

63-1306/670
3

2235

Date 5/25/00

Pay to the Order of Secretary of State $ 150.00

One hundred fifty + 00/100 Dollars

GATEWAY AMERICAN BANK OF FLORIDA
18590 N.W. 67th Avenue
Miami, Florida 33015

P990000 61359

For Workers Comp LS-0933172

Laelie De La Paz

⑆067013069⑆ 03 902129⑈01 2235

© Clarke American

GUARDIAN® SAFETY BLUE WBL

Attachment Doc #
P99000041359
B0104790

MIAMI, FL may 25, 2000

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

POST OFFICE BOX 6327

TALLAHASSEE, FL 32314

REF : P99000061359

FEIN : 65-0933172

DEAR SIRS:

PLEASE BE ADVISAED THAT WE NEVER RECEIVED YOUR ORIGINAL 2000 UNIFORM BUSINESS REPORT FORM. THAT IS THE REASON WHY WE ARE USING THIS PHOTO COPY FORM.,

VERY TRULY YOURS.,

NORMAN DE LA PAZ CARPENTRY, CORP.

Norman de la Paz