

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000061818

1. Entity Name

AEGIS FINANCIAL STRATEGIES, INC.

FILED
Jul 28, 2000 8:00 am
Secretary of State

07-28-2000 90004 002 ***150.00

Principal Place of Business

~~2600 DOUGLAS ROAD SUITE 500~~
~~CORAL GABLES FL 33134~~

Mailing Address

~~2600 DOUGLAS ROAD SUITE 500~~
~~CORAL GABLES FL 33134~~

2. Principal Place of Business

7740 SW 104TH ST
Suite, Apt. #, etc.
Suite 102

City & State
Miami FL

Zip
33156

Country

3. Mailing Address

7740 SW 104TH ST
Suite, Apt. #, etc.
Suite 102

City & State
Miami FL

Zip
33156

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

Applied for

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SALAZAR, GERMAN A
1390 S. DIXIE HWY. SUITE 1107
CORAL GABLES FL 33146

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 \$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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAS, RAUL 519 MALAGA CORAL GABLES FL 33134	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VALENTINE, EVA 15201 S.W. 88 CT. MIAMI FL 33157	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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
EVA VALENTINE

Date

7/1/00

Daytime Phone #

(305)
663-8863

CR 1E034 (3/00)

Attachment
01+p9500061818
DW75099

July 24, 2000

Florida Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam:

I have just received the 2000 Uniform Business Report, (second notice) it was sent to my home. I never received the first one as it was not forwarded to my new address, and this is my first time reporting. When I called on this matter, I was advised to send in the \$150.00 fee and an explanation as to why I had not reported before in a timely manner.

Thank you for your time on this matter.

Sincerely,



Eva Valentine

Enclosure (1 check)