

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2000 8:00 am
Secretary of State
 09-12-2000 90149 022 ***550.00

DOCUMENT # P99000065359

1. Entity Name
ABM 2000, CORP.

Principal Place of Business
133 SEVILLA
CORAL GABLES FL 33134

Mailing Address
133 SEVILLA
CORAL GABLES FL 33134

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

65-0939637

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

LOPEZ, PETER M ESQ.
133 SEVILLA
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 **D** ☐ Delete
 NAME **BUSCEMA, ANTONIO**
 STREET ADDRESS **133 SEVILLA**
 CITY-ST-ZIP **CORAL GABLES FL 33134**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANTONIO BUSCEMA, Director

Date

9/5/00

Daytime Phone #

305 444-7811

C:\R2E034 (5/00)

Rollnick & Linden, P.A.

Attachment
P99000065359
DW85429

Attorneys At Law

133 Sevilla
Coral Gables FL 33134
Tel. 305 444 7800
Fax 305 444 3683
Email: law@rol-lin.com

September 5, 2000

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

**Re: ABM 2000, Corp. -
2000 Uniform Business Report Filing**

Gentlemen:

Enclosed you will find the Year 2000 Uniform Business Report ("UBR") for the above-referenced corporation together with Check No. 477 in the amount of \$550.00 made payable of the Department of State representing the required filing fee. Please stamp the enclosed copy of this letter to evidence your receipt of the enclosure and forward same to us in the self-addressed, stamped envelope provided.

Should you have any questions, please do not hesitate to contact me.

Very truly yours,

ROLLNICK & LINDEN, P.A.



PETER M. LOPEZ

PML/mob

Enclosure

cc: ABM 2000, Corp.