

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000066591

1. Entity Name

SERVICE BRAVO, CORPORATION

FILED
Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90089 010 ***150.00

Principal Place of Business

824 PINE RIDGE DR.
PLANTATION FL 33317

Mailing Address

824 PINE RIDGE DR.
PLANTATION FL 33317-4443

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

65-0941140

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

RAMIREZ, CARMEN T
824 PINE RIDGE DR.
PLANTATION FL 33317

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 PD ☐ Delete
NAME RAMIREZ, CARMEN T
STREET ADDRESS 824 PINE RIDGE DR.
CITY-ST-ZIP PLANTATION FL 33317

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
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: Carmen T. Ramirez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/1/00 (954) 797-0451
Date Daytime Phone #

CR2E034 (9/99)

Attachment
#99 0000 66591
A0071881

August 1, 2000

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

Re: Service Bravo, Corp. EIN: 65-0941140
2000 Uniform Business Report

Dear Sir or Madam,

We have enclosed the 2000 Uniform Business Report and a check payable to the Florida Department of State in the amount of \$150.00. The Corporation was incorporated in late 1999, however the corporate officer, Carmen T. Ramirez, was ill-advised by an individual that had been retained to perform accounting services on behalf of the corporation. The officer was unfortunately led to believe that a uniform business report was not needed to be filed since the corporation did not engage in business activities until the year 2000. In addition, the corporate officer had a sickness in her family that consumed the majority of her time and demanded most of her mental attention.

The officer has now been made aware of proper filing requirements and she sincerely wishes to resolve this matter. We respectfully request that you abate the additional \$400 late filing fee.

Thank you kindly for your attention to this matter.

Sincerely,



Joseph Castro, Accountant

Encl.