

2000 UNIFORM BUSINESS REPORT (UBR)

4/17/

FILED

May 11, 2000 8:00 am
Secretary of State

04-17-2000 90083 036 ***150.00

DOCUMENT # P99000072114

1. Entity Name

ALSAL, INC.

Principal Place of Business

Mailing Address

PO BOX 620309
OVIEDO FL 32765

PO BOX 620309
OVIEDO FL 32762-0309

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

59-3592547

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PENA, ALFREDO
2449 SOUTHERN HILLS CT.
OVIEDO FL 32762

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

TITLE NAME	President <input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	Alfredo Pena
TITLE NAME	Vice President <input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	Sarah A. Pena 2449 Southern Hills Ct. Oviedo, FL 32765
TITLE NAME	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

Alfredo Pena
REQUIRED

4/7/00

Date

(407)366-4011

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment to 2000 Uniform Business Report (UBR)
Document #P99000072114

April 29, 2000

300616

Per your request, please be advised that these are the names and physical addresses of the officers of ALSAL, INC.:

President

Alfredo Pena
2449 Southern Hills Ct.
Oviedo, Florida 32765

Vice President

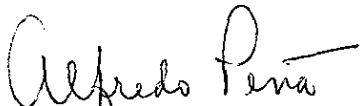
Sarah A. Pena
2449 Southern Hills Ct.
Oviedo, Florida 32765

Secretary/Treasurer

Sarah A. Pena
2449 Southern Hills Ct.
Oviedo, Florida 32765

Current Registered Agent

Alfredo Pena
2449 Southern Hills Ct.
Oviedo, Florida 32765



Alfredo Pena, President

4/29/2000

Date

