

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Jul 26, 2000 8:00 am**  
**Secretary of State**

07-26-2000 90043 041 \*\*\*150.00

**DOCUMENT # P99000082849**

1. Entity Name

**CAISER POOL PLASTERING, INC.**

*R*

Principal Place of Business

**8878 N.W. 119TH STREET  
HIALEAH GARDEN FL 33012**

Mailing Address

**8878 N.W. 119TH STREET  
HIALEAH GARDEN FL 33012**

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- 3611435**

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

**ISER, CARLOS  
8878 N.W. 119TH STREET  
HIALEAH GARDEN FL 33012**

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 **PSD** ☐ Delete  
NAME **ISER, CARLOS**  
STREET ADDRESS **8878 N.W. 119TH STREET**  
CITY-ST-ZIP **HIALEAH GARDEN FL 33012**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
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TITLE ☐ Change ☐ Addition  
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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*7/18/00*

CR2E034 (5/00)

Law Offices  
SANTIAGO DIEZ, P.A.  
Banco Santander Center  
Suite 500  
1401 Brickell Avenue  
Miami, Florida 33131

Attachment  
049900082849  
0074924

Tel: (305) 377-4005

Fax: (305) 374-0456

July 20, 2000

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

RE: Caizer Pool Plastering, Inc.

Dear Sir or Madam:

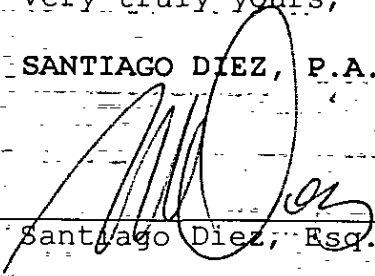
Enclosed herewith, for filing please find the 2000 Uniform Business Report for the above referenced entity. The entity did not receive the first notice of filing its annual report. The enclosed Proforma Report was received by the entity after the May 01, 2000 due date. Therefore, our client respectfully requests that the \$400.00 penalty be abated. Enclosed herewith please find a check made payable to the Florida Department of State for \$150.00.

Thank you for your attention to this matter. Please do not hesitate to contact the undersigned if our client's request to have the penalty abated is not granted.

Very truly yours,

SANTIAGO DIEZ, P.A.

By:

  
Santiago Diez, Esq.

SD/sf  
Encls.