

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90086 048 ***150.00

DOCUMENT # P99000085068

1. Entity Name

UNITED SCREENING SERVICES CORPORATION

Principal Place of Business

Mailing Address

430 CALIGULA AVENUE
 CORAL GABLES FL 33146

430 CALIGULA AVENUE
 CORAL GABLES FL 33146-2804

2. Principal Place of Business

3. Mailing Address

6915 Red Road

P.O. BOX 43-1321

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 213 B

City & State
 Coral Gables, Fl.

City & State
 South Miami, Fl.

Zip
 33143

Country
 USA

Zip
 33243

Country
 USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0949962

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

SANCHEZ, ROBERT E
 430 CALIGULA AVENUE
 CORAL GABLES FL 33146

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

Robert E. Sanchez

01-05-2000

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

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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:

Robert E. Sanchez / V.P.

01/05/2000 (309) 661-3131

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)