

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000086785

1. Entity Name  
TERRA MAR REALTY OF MIAMI, INC.

**FILED**  
**Aug 15, 2000 8:00 am**  
**Secretary of State**

08-15-2000 90002 002 \*\*\*158.75

Principal Place of Business  
8552 S.W. 8TH STREET  
MIAMI FL 33414

Mailing Address  
8552 S.W. 8TH STREET  
MIAMI FL 33414



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
8552 SW 8 STREET  
Suite, Apt. #, etc.

3. Mailing Address  
8552 SW 8 STREET  
Suite, Apt. #, etc.

City & State  
MIAMI FL  
Zip  
33144  
Country  
MIAMI-DADE

City & State  
MIAMI FL  
Zip  
33144  
Country  
MIAMI-DADE

4. FEI Number  
65-0953064  
Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
DANIELS, GLEN H  
8552 S.W. 8TH STREET  
MIAMI FL 33414

7. Name and Address of New Registered Agent  
Name  
DANIELS, GLEN H  
Street Address (P.O. Box Number is Not Acceptable)  
8552 SW 8 STREET  
City  
MIAMI FL Zip Code  
33144

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 *Glen H. Daniels* GLEN H. DANIELS 08/08/2000  
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	PTD	<input type="checkbox"/> Delete	TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANIELS, GLEN H		NAME		
STREET ADDRESS	8552 S.W. 8TH STREET		STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33414		CITY-ST-ZIP	MIAMI, FL 33144	
TITLE	SD	<input type="checkbox"/> Delete	TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DINELLO, MARCO		NAME		
STREET ADDRESS	8552 S.W. 8TH STREET		STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33414		CITY-ST-ZIP	MIAMI, FL 33144	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: *Glen H. Daniels* GLEN H. DANIELS - PRESIDENT 08/08/2000 (305) 269-9500  
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (5/00)

Attachment  
Doc # P99000086785  
DW 78795

081400

**TERRA MAR REALTY OF MIAMI, INC.**

8552 SW 8<sup>th</sup> STREET

MIAMI, FLORIDA 33144

PHONE: (305)269-9500 \* FAX: (305)269-9050

August 8, 2000

Division of Corporations  
Uniform Business Report Filings  
PO Box 1500  
Tallahassee, Florida 32302-1500

**RE: P99000086785**  
**2000 Uniform Business Report**

**Att: Reinstatement Department**

Dear Sir/Madam:

As per your instructions, enclosed please find a second **2000 Uniform Business Report** for our corporation along with another check in the amount of **\$158.75** since the original, which was mailed on April 18, 2000, apparently was never received by you.

I'm hereby asking you to please accept this form with the enclosed payment and waive the late penalty due to the original report and payment being sent on time, but apparently being lost in the mail.

Thank you.

Sincerely,



Glen H. Daniels  
President/Treasurer

Enclosure