2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9900089098

1. Entity Name

INSPECTORS OF SOUTH FLORIDA INC.

FILED Feb 28, 2001 8:00 am Secretary of State 02-28-2001 90139 024 ***150.00

Daytime Phone #

		Mailing Address 14100 S.W. 99TH AVENUE MIAMI FL 33176		-)	118118 18111 88118 (0181 1811 1816
2. Principal Place of Business		3. Mailing Address	-		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State		City & State	<u>.</u>	4. FEI Number 65-0953630	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Current Re		Registered Agent	<u> </u>	7. Name and Address of New Register	ed Agent
			Name		
CRIADO, EMILIO 14100 S.W. 99TH AVENUE			Street Addres	Street Address (P.O. Box Number is Not Acceptable)	
MIAM	II FL 33176		City	8	Zip Code
					
8. The above	named entity submits this statement f	or the purpose of changing it	ts registered office or regis	stered agent, or both, in the State of Florida.	
SIGNATURE _	Signature, typed or printed name of registered ager	t and title if scolingble (NC	TE: Registered Agent signature requ	uired when reinstating) DA	TF
	ogradie, types of prince half of highlance age.				
•	oration is eligible to satisfy its Intangib		V!!! FEE IS \$150.00	10. Election Campaign Financing	\$5.00 May Be
	requirement and elects to do so. ria on back)		2001 Fee will be \$550.0 able to Department of \$	I HUSEFUNG CONTIDUCION.	☐ Added to Fees
				<u> </u>	AND DIDECTORS IN 11
11.	OFFICERS AND		12.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	CRIADO, EMILIO	☐ Delete	TITLE		Change Addition
NAME STREET ADDRESS	14100 S.W. 99TH AVENUE		NAME STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33176		CITY-ST-ZIP		
	WIAWII PE 33170	□ Delete	TITLE		Change Addition
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-	partifuthat the information and in	ith this filing door +		in Section 119.07(3)(i), Florida Statutes. I furthe	or partify that the information
indicatéd	d on this report or supplemental epor proporation or the receiver of trustee or d, or on an attachment with an address	t is true and accurate and the	at my signature shall have ort as required by Chante	the same legal effect as if made under oath; the form of the same legal effect as if made under oath; the form of the same appears to the same app	nat I am an officer or director ears in Block 11 or Block 12 if

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR