

2000 UNIFORM BUSINESS REPORT (UBR)

1 of 2

DOCUMENT # P 99000094195

1. Entity Name

FIRST CLASS FINANCIAL SERVICES, INC.

FILED

00 JUL 19 PM 12:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

660936

Principal Place of Business

Mailing Address

15315 SW 52nd. Terr.
Miami, FL 3318515315 SW 52nd. Terr.
Miami, FL 33185

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

65-0956871

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Ribera, Juan P.
15315 SW 52nd. Terr.
Miami, FL 33185

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Ribera, Juan P. 15315 SW 52nd. Terr. Miami, FL 33185 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

A & E GARCIA, P.A.

CERTIFIED PUBLIC ACCOUNTANTS
2588 S.W. 27TH AVENUE
MIAMI, FLORIDA 33133-2143

282

July 14, 2000

FLORIDA DEPARTMENT OF STATE
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: Computer Spectrum International Corporation, J70726

Lin's Property Management, Inc., P94000057449

Internet Spectrum Corporation, P98000000572

First Class Financial Services, Inc., P99000094195

Dear Sir or Madam:

We are in receipt of your letters to our clients where you inform them that their annual reports (Uniform Business Report) were received by you but have not been filed. See attached letters.

We feel that there must be an error with this because these annual reports were taken directly by us to the post office on Monday, May 1 at about noon. Therefore, they had to be postmarked on May 1, 2000.

It is respectfully requested that you waive these penalties since we feel that they are in error and the payment of an additional \$400 per company would be extremely stressful to their financial condition.

Your consideration in this matter would be greatly appreciated.

Sincerely,


Eileen Garcia, CPA