

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V02652

1. Entity Name

RAMIREZ & WATSON, P.A.

FILED
Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90012 001 ***450.00

Principal Place of Business

Mailing Address

10041 PINES BLVD.
SUITE C
PEMBROKE PINES FL 33024
US

10041 PINES BLVD.
SUITE C
PEMBROKE PINES FL 33024-6170
US

2. Principal Place of Business

3. Mailing Address

2501 E. Commercial Blvd
Suite, Apt. #, etc.
Ste 216

21 Compass Road
Suite, Apt. #, etc.

City & State

FT. LAUDERDALE, FL

City & State

FT. LAUDERDALE, FL

Zip

33308

Country

USA

Zip

33308

Country

USA

4. FEI Number

65-0300899

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

FREDERICK, RAMIREZ J.
10041 PINES BLVD.
SUITE C
PEMBROKE PINES FL 33024

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	PST RAMIREZ, FRED 10041 PINES BLVD., SUITE C PEMBROKE PINES FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAMIREZ, FRED 10041 PINES BLVD., SUITE C PEMBROKE PINES FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST FRED RAMIREZ ste 216 2501 E. Commercial Blvd. FT. LAUDERDALE, FL 33308	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRED RAMIREZ ste 216 2501 E Commercial Blvd FT. LAUDERDALE FL	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Fred Ramirez (FRED RAMIREZ)

1/13/00

Date

Daytime Phone #

CR2E034 (9/99)