

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V52074

1. Entity Name
AMIGOS III, INC.

f

FILED
Jul 26, 2000 8:00 am
Secretary of State

07-26-2000 90018 048 ***150.00

Principal Place of Business

494 SEMORAN BLVD
WINTER PARK FL 32716
US

Mailing Address

120 NORTH WESTMONTE DRIVE
ALTAMONTE SPRINGS FL 32714

2. Principal Place of Business

3. Mailing Address

140 N Westmonte Dr Suite 203

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Altamonte Springs FL

City & State

City & State

DO NOT WRITE IN THIS SPACE

Zip 32792

Country

Zip 32714

Country USA

4. FEI Number 59-3136473

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

HYLTIN, ANDREW A.
120 NORTH WESTMONTE DRIVE
ALTAMONTE SPRINGS FL 32714

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

Andrew A. Hyltin

7-20-00

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 ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP
HYLTIN, ANDREW A.
120 NORTH WESTMONTE DR.
ALTAMONTE SPRNGS FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ 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

7-20-00

Date

Daytime Phone #

CR2E034 (15/00)

DOC # V52074

B0103676

Altamonte Springs
Oviedo
Winter Park
Orlando S.O.B.T.
Church Street
Tavares



Corporate Office
140 N. Westmonte Drive
Suite 203
Altamonte Springs, FL 32714
Office (407) 869-8008
Fax (407) 869-8039

July 20, 2000

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

To Whom It May Concern :

This letter is concerning the 2000 Uniform Business Report that is enclosed. We did not receive the first notice. The enclosed is the second notice.

After telephoning your department today, we were instructed to make any necessary address changes and forward this report with a fee of \$150.00.

If you have any questions, please call (407) 869 - 8008.

Sincerely,


Andrew Hyltin