

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 634043

1. Entity Name

UNITED AMERICAN CITRUS, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90033 005 ***150.00

Principal Place of Business

Mailing Address

3015 N OCEAN BLVD #104
 FT. LAUDERDALE FL 33308

3015 N OCEAN BLVD #104
 FT. LAUDERDALE FL 33308-7300

2. Principal Place of Business

3. Mailing Address

P.O. Box 550369
 Suite, Apt. #, etc.

P.O. Box 550369
 Suite, Apt. #, etc.

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

4. FEI Number

59-1951880

Applied For

Not Applicable

Zip

33355

Country

Zip

33355

Country

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

GERBER, EDWARD H.
 3015 N OCEAN BLVD #104
 FT. LAUDERDALE FL 33308

Name: Gerber, Edward H.
 Street Address (P.O. Box Number is Not Acceptable): 3400 Galt Ocean Drive, Apt # PH25
 City: Ft. Lauderdale FL Zip Code: 33308

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.

Edward H. Gerber, VD

SIGNATURE: *Edward H. Gerber*

4/18/00

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	<input type="checkbox"/> Delete
VD	GERBER, EDWARD H.	3015 N OCEAN BLVD #104	FT LAUDERDALE FL	<input type="checkbox"/>
TSD	RUBI, MARIA M.	3015 N OCEAN BLVD #104	FT. LAUDERDALE FL	<input checked="" type="checkbox"/>
VD	TROXEL, SUE A.	3015 N. OCEAN BLVD #104	FT. LAUDERDALE FL	<input type="checkbox"/>
PD	HOULIN, MICHAEL B.	3015 N. OCEAN BLVD #104	FT. LAUDERDALE FL	<input type="checkbox"/>
VDS	TROXEL, SIDNEY R	3015 N. OCEAN BLVD.	FT. LAUDERDALE FL 33308	<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
		3400 Galt Ocean Drive, Apt. # PH25	Ft. Lauderdale, FL 33308	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		13400 S.W. 30th Ct.	Davie, FL 33330	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		201 N.W. 121st Ave.	Coral Springs, FL 33071	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		VDST	13400 S.W. 30th Ct.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			Davie, FL 33330	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Edward H. Gerber, V.D.*
 Edward H. Gerber, V.D.

4/18/00

954/915-9067

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)