

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90042 025 ***150.00

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DO NOT WRITE IN THIS SPACE

DOCUMENT # 680309

1. Entity Name

ARNOLD FURTH INC.

Principal Place of Business

2000 S. OCEAN BLVD. 2-A
 POMPANO BEACH FL 33062-8025

Mailing Address

2000 S. OCEAN BLVD. 2-A
 POMPANO BEACH FL 33062-8025

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

11-2045648

Applied For

Not Applicable

Zip

Country

Zip

Country

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

ROSE MARY SIKORSKI

Rose Mary Sikorski
2738 SE 9th St.
Pompano Beach, FL 33062

*NOTE CHANGE OF ADDRESS
 2738 S.E. 9th STREET
 POMPANO BEACH, FL 33062*

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
DP
ROSE MARY SIKORSKI
2738 S.E. 9TH ST
POMPANO BEACH FL 33062

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
2738 S. E. 9th STREET

☒ Change ☐ Addition

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FURTH, BARBARA
2000 S OCEAN BLVD
POMPANO BEACH, FL FL 33062

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☐ 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 all other like empowered.

SIGNATURE:

Rose Mary Sikorski **ROSE MARY SIKORSKI** 3/15/00 954-784-8407

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)