

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 23, 2000 8:00 am
Secretary of State

02-23-2000 90017 047 ***150.00

DOCUMENT # J22986

1. Entity Name

JOE BARTOSIK, INC.

Principal Place of Business

Mailing Address

3905 INVESTMENT LN
 STE 22
 RIVIERA BEACH FL 33404
 US

3905 INVESTMENT LANE
 UNIT 22
 RIVIERA BEACH FL 33404-1749
 US

010704



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2706919

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

~~BARTOSIK, JOSEPH ANTHONY
 11152 88TH ROAD NORTH
 PALM BEACH GARDENS FL 33412~~

Name **Bartosik, Joseph**

Street Address (P.O. Box Number is Not Acceptable)
11440 Kidd Lane

City **Palm Bch. Gardens FL** Zip Code **33410**

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	Delete
PVP	BARTOSIK, JOSEPH ANTHONY	11152 88TH RD. N.	PALM BEACH GARDENS FL 33412	<input type="checkbox"/>
TD	BARTOSIK, JOSEPH ANTHONY	11152 88TH RD. N.	PALM BEACH GARDENS FL 33412	<input type="checkbox"/>
S	BARTOSIK, LYNDA CAROL	11152 88TH RD. N.	PALM BEACH GARDENS FL 33412	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
Pres.	Bartosik, Joseph	11440 Kidd Lane	Palm Bch Gardens, FL. 33410	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
Secretary	Jessica LoParco	11152 88th Rd N.	Palm Bch Gardens, FL. 33412	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<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: Joseph Bartosik **Joseph Bartosik** 2/18/00 561-842-7343
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #