

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **J68755**

1. Entity Name

GBY, Inc.

APPROVED
AND
FILED

00 SEP 13 AM 11:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**1920 FOUNTAINVIEW
HOUSTON, TX 77057
U.S.**

Mailing Address
**1920 FOUNTAINVIEW
HOUSTON, TX 77057
U.S.**

2. Principal Place of Business
Succ. Apt. #, etc.

3. Mailing Address
Succ. Apt. #, etc.

City & State
Zip

City & State
Zip

4. FEI Number
59-2805558

Assessed 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

**FIGURSKI, GERALD A., ESQ.
8406 MASSACHUSETTS AVE.
NEW PORT RICHEY, FL 34653**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above required entity submits this statement for the purpose of changing its registration office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and the filer

Signature, typed or printed name of registered agent and the filer

TAXP

9. This corporation is eligible to satisfy its franchise
tax filing requirement and elects to do so.
(See criteria on back) ☒

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	TITLE	☐ Change ☐ Addition	TITLE	☐ Change ☐ Addition	TITLE	☐ Change ☐ Addition
NAME	☐ Delete	NAME	☐ Change ☐ Addition	NAME	☐ Change ☐ Addition	NAME	☐ Change ☐ Addition
STREET ADDRESS	☐ Delete	STREET ADDRESS	☐ Change ☐ Addition	STREET ADDRESS	☐ Change ☐ Addition	STREET ADDRESS	☐ Change ☐ Addition
CITY-STATE-ZIP	☐ Delete	CITY-STATE-ZIP	☐ Change ☐ Addition	CITY-STATE-ZIP	☐ Change ☐ Addition	CITY-STATE-ZIP	☐ Change ☐ Addition
P	☐ Delete	RIZK, FRED	☐ Change ☐ Addition	300003391723--S	☐ Change ☐ Addition	300003391723--S	☐ Change ☐ Addition
1920 FOUNTAINVIEW	☐ Delete	1920 FOUNTAINVIEW	☐ Change ☐ Addition	-09/13/00--01057--019	☐ Change ☐ Addition	-09/13/00--01057--020	☐ Change ☐ Addition
HOUSTON, TX	☐ Delete	HOUSTON, TX	☐ Change ☐ Addition	*****550.00 *****550.00	☐ Change ☐ Addition	*****8.75 *****8.75	☐ Change ☐ Addition
V	☐ Delete	ENGEL, ROBERT	☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition
1920 FOUNTAINVIEW	☐ Delete	1920 FOUNTAINVIEW	☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition
HOUSTON, TX	☐ Delete	HOUSTON, TX	☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition
S	☐ Delete	THOMPSON, LOIS	☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition
1920 FOUNTAINVIEW	☐ Delete	1920 FOUNTAINVIEW	☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition
HOUSTON, TX	☐ Delete	HOUSTON, TX	☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition
T	☐ Delete	ENGEL, ROBERT	☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition
1920 FOUNTAINVIEW	☐ Delete	1920 FOUNTAINVIEW	☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition
HOUSTON, TX	☐ Delete	HOUSTON, TX	☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition
[]	☐ Delete	[]	☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition
[]	☐ Delete	[]	☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition
[]	☐ Delete	[]	☐ Change ☐ Addition		☐ Change ☐ Addition		☐ Change ☐ Addition
[]	☐ Delete	[]	☐ Change ☐ Addition		☐ Change ☐ Addition		☐ 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)(f), 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

FRED E RIZK

9-11-00

713-977-6000

Daytime Phone

[Signature]