

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L26938

1. Entity Name

FUTURISTICS ENTERPRISES, INC

FILED
May 07, 2000 8:00 am
Secretary of State

05-07-2000 90040 031 ***150.00

Principal Place of Business

Mailing Address

9200 NW 31ST PL
 SUNRISE FL 33351

9200 NW 31ST PL
 SUNRISE FL 33351-7211

2. Principal Place of Business

4263 NW 12th St.

3. Mailing Address

4263 NW 12th St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LAUDERHILL FL

City & State

LAUDERHILL FL

4. FEI Number

65-0164323

Applied For
 Not Applicable

Zip

Country

33313

Zip

Country

33313

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

FENTON, ORAL
 9200 NW 31ST PL
 SUNRISE FL 33351

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

Oral Fenton
 ORAL FENTON

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 Delete
 NAME DP
 FENTON, ORAL
 STREET ADDRESS 9200 NW 31ST PL
 CITY-ST-ZIP SUNRISE FL

TITLE Change Addition
 NAME DP
 ORAL FENTON
 STREET ADDRESS 9200 NW 31ST PL
 CITY-ST-ZIP SUNRISE FL 33351

TITLE Delete
 NAME DV
 CUSHNIE, DAVID
 STREET ADDRESS 402 SW 75TH AVE
 CITY-ST-ZIP N. LAUDERDALE NY

TITLE Change Addition

TITLE Delete
 NAME DV
 ARMSTRONG, BALDWIN
 STREET ADDRESS 630 OCEAN AVE., #2H
 CITY-ST-ZIP BROOKLYN NY

TITLE Change Addition

TITLE Delete
 NAME DV
 GORDON, GLADSTONE
 STREET ADDRESS 3396 YELLOWFIN LN
 CITY-ST-ZIP MARGATE FL

TITLE Change Addition

TITLE Delete

TITLE Change Addition

TITLE Delete

TITLE 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:

Oral Fenton
 ORAL FENTON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/00

Date

904 792-1448

Daytime Phone #