

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000009300 ✓

1. Entity Name

SHADE 2000 INC

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90053 008 ***150.00

00056991

DO NOT WRITE IN THIS SPACE

Principal Place of Business
4120 MANHO BLVD
ROYAL PALM BEACH FL 33411

Mailing Address
4120 MANHO BLVD
ROYAL PALM BEACH FL 33411

2. Principal Place of Business
515 A S. FRY RD

3. Mailing Address
515 A S. FRY RD

Suite, Apt. #, etc.
312

Suite, Apt. #, etc.
312

City & State
KATY, TX

City & State
KATY, TX

Zip
77450

Country
HARRIS

Zip
77450

Country
HARRIS

4. FEI Number
65-0730336

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DICKENSON, GREGORY B ESQ.
140 INTRACONSTRAL DRIVE
SUITE 401
JUPITER FL 33477

7. Name and Address of New Registered Agent

Name
CLARE E BAKER

Street Address (P.O. Box Number is Not Acceptable)
621 6TH LN

City
PALM BEACH GARDENS

FL

Zip Code
33418

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  CONTROLLER 4/28/00

(NOTE: Registered Agent signature required when reinstating)

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D MORRIS MILTON H
PO Box 21006 N/A
W PALM BEACH FL 33421-0066 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VP MORRIS, KANDY K
PO Box 21006 N/A
W. PALM BEACH FL 33421-0066 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PRES
SIS A S. FRY RD #312
KATY TX 77450 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/00 (281) 65-2000

Date Daytime Phone #

CR2E034 (9/99)