

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90102 024 ***150.00

DOCUMENT # P97000066262

1. Entity Name

NEW KIDS ON THE BLOCK, INC.

Principal Place of Business

Mailing Address

1161 E ATLANTIC AVENUE
 DELRAY BEACH FL 33482

1161 E ATLANTIC AVENUE
 DELRAY BEACH FL 33483-6911

00019577



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

65-0771831

Applied For

Not Applied For

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

WEINER, DANA
10236 BOCA ENTRADA BLVD #229
BOCA RATON FL 33428

Name

Alan Feigenbaum

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

200 KNUTH RD. STE 220

City

BOYNTON BEACH

FL

Zip Code **33436**

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

[Handwritten Signature]

1/19/2000

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 **D** Delete
 NAME **KATZ, SHARI**
 STREET ADDRESS **9290-VEDRA POINTE LN**
 CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE Change Addit
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **WEINER, DANA**
 STREET ADDRESS **10236 BOCA ENTRADA BLVD #229**
 CITY-ST-ZIP **BOCA RATON FL 33428**

TITLE Change Addit
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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:

[Handwritten Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/2000
 Date

561-276-4991
 Daytime Phone #