

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 18, 2000 8:00 am**  
**Secretary of State**

07-18-2000 90011 048 \*\*\*150.00

**DOCUMENT # P98000038768**

1. Entity Name  
**BARGAINS2U, INC.**

*f*

Principal Place of Business  
**4830 SOUTHWEST 170TH AVENUE  
 FORT LAUDERDALE FL 33331**

Mailing Address  
**4830 SOUTHWEST 170TH AVENUE  
 FORT LAUDERDALE FL 33331**



DO NOT WRITE IN THIS SPACE

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

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

City & State

City & State

4. FEI Number **65-0833350**

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**

**CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE FL 32301-2525**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>GALLAGHER, JOAN K</b>
STREET ADDRESS	<b>4830 SOUTHWEST 170TH AVENUE</b>
CITY-ST-ZIP	<b>FORT LAUDERDALE FL 33331</b>
TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>GALLAGHER, GERARD</b>
STREET ADDRESS	<b>4830 SOUTHWEST 170TH AVENUE</b>
CITY-ST-ZIP	<b>FORT LAUDERDALE FL 33331</b>
TITLE	<b>D</b> <input type="checkbox"/> Delete
NAME	<b>DAVIS, GLENN</b>
STREET ADDRESS	<b>605 SOUTHWEST 76TH AVENUE</b>
CITY-ST-ZIP	<b>NORTH LAUDERDALE FL 33331</b>
TITLE	<input type="checkbox"/> Delete
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TITLE	<input type="checkbox"/> Delete
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: *Joan K Gallagher*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-11-00

Date Daytime Phone #

Attachment  
D# 9800038768  
D0071363

Bargain2u, Inc.  
4830 S W 170 Ave  
Ft Lauderdale, FL 33331  
Phone 954-434-9292

Division of Corporations  
Uniform Business Report Filings  
P O Box 1500  
Tallahassee, FL 32302-1500

To whom it may concern,

Enclosed is check #1221 for \$150.00 for filing fee. I apologize for the delayed payment as I never received request form in the mail.

Sincerely,

  
Joan K. Gallagher