2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000075940 1. Entity Name ENTERPRISES IN SUCCESS, INC.					Apr 24, 2000 08:00 AM Secretary of State			
•	ce of Business ON HILL ROAD	Mailing Address 26641 MONDON HILL ROAD						
BROOKSVILLE FL 34601		BROOKSVILLE FL 34601						
2. Principal P	Place of Business	3. Mailing Address	· · · · · · · · · · · · · · · · · · ·					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & Stat	e	City & State			4. FEI Number Applied For S9-3530768 Not Applicable			
Zip	Country	Zip (Country	5. Certificate	of Status Desired	\$8.75 Fee Re	5 Additional equired	
	6. Name and Address of Current F	Registered Agent		7. Name and	Address of New Reg	istered Agent		
YOUR BUSINESS MATTERS II, INC. 9211 BRADY STREET			Street Ad	Name YOUR BUSINESS MATTERS JNC. Street Address (P.O. Box Number is Not Acceptable) 8301 FOREST OAKS BLVD				
SPRING H		,				,		
FL34608	. US		City SPRING				Code	
8. The above	named entity submits this statement for	the purpose of changing its reg			n, in the State of Floric		.34606	
SIGNATURE.	KATHY JFITCH Signature, typed or printed name of registered agent ar	nd title il applicable. (NOTÈ Re	gisterad Agent signature	quired when reinstating)		04/24/20 DATE)00	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) This corporation is eligible to satisfy its Intangible After MAY 1, 2000 Fee Make Check Payable to I			Fee will be \$55	\$550.00 Trust Fund Contribution Added to Fees				
11.	OFFICERS AND D		12.	ADDITIONS/	CHANGES TO OFFICE	ERS AND DIREC	TORS IN 11	
NAME STREET ADDRESS	D TONKIN GEOFF 7496 BIRDLAND CRESCENT	☐ Delete ·	STREET ADDRESS	REEN LO 6641 MONDON F	ORELEI T IILL RD	· Ch	ange 🗀 Addition	
CITY-ST-ZIP	SPRING HILL	FL 34607	-	ROOKSVILLE	•	FL 34601		
NAME STREET ADDRESS CITY-ST-ZIP	D GREEN JOHN E 26641 MONDON HILL ROAD BROOKSVILLE	□ Delete FL 34601	T.TLE NAME STREET ACORESS CITY-ST-ZIP			☐ Ch	ange □ Addition i	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Deiete	T TLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Ch	ange	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Ch	ange 🗌 Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Cha	ange 🔲 Addition	
of the cor	certify that the information supplied with the on this report or supplemental report is a poration or the receiver or trustee empore or on an attachment with an address, we	true and accurate and that my s vered to execute this report as r	ionature shall bay	the same legal effect	as if made under oat	h:that laman o	officer or director I	