## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Aug 25, 2000 8:00 am Secretary of State DOCUMENT # **P99000075220** 1. Entity Name AMALIA IVEY INC. 08-25-2000 90007 007 \*\*\*150.00 Mailing Address Principal Place of Business 1629 S. CLUB DR. 1629 S. CLUB DR. WELLINGTON FL 33414 WELLINGTON FL 33414 RESTORAN Principal Place of Business ON SUNDERLAND AVE 3. Mailing Address 2008 SAME DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State Not Applicable ELLINGTON, Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent IVEY, AMALIA Street Address (P.O. Box Number is Not Acceptable) WE 1629 S. CLUB DR. **WELLINGTON FL 33414** 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TIT! F AMALIA IVEY 2008 SUNDERLAND AVE □ Delete TITLE NAME IVEY, AMALIA NAME STREET ADDRESS STREET ADDRESS 1629 S. CLUB DR. CITY-ST-ZIP CITY-ST-ZIP WELLINGTON FL 33414 ☐ Addition Delete TITLE TITI F NAME. MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS 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: 8

AMALIA IVEY, INC. 2008 SUNDERLAND AVENUE WELLINGTON, DLORIDA 33414

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

July-31,:2000---

Re: Uniform Business Report

To Whom It May Concern:

Please accept my apologies for the oversight. I am new and unfamiliar as a business owner to the paperwork necessary to maintain a perpetual corporation. I had not received the initial mailing of the Uniform Business Report form that was mailed to me, early this year. I was unaware of the existence and importance of this form. I had moved in November of 1999 and this particular form did not reach me at the new address.

I have enclosed a check for the filing fee of \$150.00 in the hopes that you will accept my report and forgive my oversight. There was no knowledgeable intent to deceive or not pay the filing fee.

Thank you in advance for your understanding in this matter.

Sincerely,

Amalia Ivey

Pres. Amalia Ivey, Inc.