

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V51311

1. Entity Name

NETWORTHUSA.COM INC.

Principal Place of Business

8 GAUCHO DRIVE  
ROLLING HILLS ESTATES CA 90274  
US

Mailing Address

P.O. BOX 2369  
PALOS VERDES PENINSULA CA 90274-8369

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

95-4720231

Applied For

Not Applicable

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

CAPITAL CONNECTIONS, INC.  
417 E. VIRGINIA STREET, SUITE 1  
TALLAHASSEE FL 32301

SS

Name

C T CORPORATION SYSTEM

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

1200 South Pine Island Road

City

Plantation

FL

Zip Code  
33324

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.

M.T. FITZPATRICK  
ASSISTANT SECRETARY

(NOTE: Registered Agent signature required when reinstating)

DATE

4/28/00

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PTD  
LOCKWOOD, ROBERT C  
1177 WEST HASTINGS, SUITE 2101  
VANCOUVER B.C., CANADA V6T-2K3

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
GOVE, ROBERT E  
8 GAUCHO DRIVE  
ROLLING HILLS ESTATES CA 90274

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
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CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ROBERT LOCKWOOD PTD  
8 GAUCHO DR.  
ROLLING HILLS ESTATES CA. 90274

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DAVID R. MILLER STD  
8 GAUCHO DR.  
ROLLING HILLS ESTATES CA 90274

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
JAMES DAVIS D  
8 GAUCHO DR.  
ROLLING HILLS ESTATES CA 90274

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ANDRE PEIRAKIS D  
8 GAUCHO DR.  
ROLLING HILLS ESTATES CA 90274

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
6000032608-6  
-05/19/00-01127-025  
\*\*\*\*\*150.00 \*\*\*\*\*150.00

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
6000032608-6  
-05/19/00-01127-026  
\*\*\*\*\*8.75 \*\*\*\*\*8.75

☐ 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

DAVID R. MILLER

Date

Daytime Phone #

APR/27/00

604/644/6100

APPROVED  
AND  
FILED

00 MAY -1 AM 11:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)