

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90210 028 ***150.00

947894

DO NOT WRITE IN THIS SPACE

DOCUMENT # V52754

1. Entity Name
 NewCen Maintenance, Inc.

Principal Place of Business
 100 Century Boulevard
 West Palm Beach, FL 33417

Mailing Address
 100 Century Boulevard
 West Palm Beach, FL 33417

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip

4. FEI Number
 65-0347874

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 Mary Jane Merola
 100 Century Boulevard
 West Palm Beach, FL 33417

7. Name and Address of New Registered Agent
 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ **DATE** _____

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

TITLE	C	<input type="checkbox"/> Delete
NAME	Levy, H. Irwin	
STREET ADDRESS	100 Century Blvd.	
CITY-ST-ZIP	West Palm Beach, FL 33417	
TITLE	DP	<input type="checkbox"/> Delete
NAME	Levy, Mark F.	
STREET ADDRESS	100 Century Blvd.	
CITY-ST-ZIP	West Palm Beach, FL 33417	
TITLE	DVTP	<input type="checkbox"/> Delete
NAME	Jaiven, Jack	
STREET ADDRESS	100 Century Blvd.	
CITY-ST-ZIP	West Palm Beach, FL 33417	
TITLE	V	<input type="checkbox"/> Delete
NAME	Gleeson, Antoinette	
STREET ADDRESS	100 Century Blvd.	
CITY-ST-ZIP	West Palm Beach, FL 33417	
TITLE	S	<input type="checkbox"/> Delete
NAME	Floyd, Orilla	
STREET ADDRESS	100 Century Blvd.	
CITY-ST-ZIP	West Palm Beach, FL 33417	
TITLE	D	<input type="checkbox"/> Delete
NAME	Halperin, Maurice	
STREET ADDRESS	100 Century Blvd.	
CITY-ST-ZIP	West Palm Beach, FL 33417	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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:  **Jack Jaiven, Vice President** **4/13/00** **(561) 640-3105**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)