

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2003 8:00 am
Secretary of State

01-15-2003 90302 005 ***150.00

DOCUMENT # 182211

1. Entity Name
GAZEBO CORPORATION



Principal Place of Business
**1900 N.W. CORPORATE BLVD.
#302E
BOCA RATON FL 33431
US**

Mailing Address
**1900 N.W. CORPORATE BLVD.
#302E
BOCA RATON FL 33431
US**

00004156



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
21034 Rosedown Ct.
Suite, Apt. #, etc.

3. Mailing Address
21034 Rosedown Court
Suite, Apt. #, etc.

City & State
Boca Raton, FL
Zip
33433 Country
US

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Boca Raton, FL
Zip
33433 Country
US

4. FEI Number
59-0792990

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**FISHER, MIKE
C/O GOLDSTEIN & LEWIN
1900 N.W. CORPORATE BLVD., 300
BOCA RATON FL 33431**

7. Name and Address of New Registered Agent

Name
Jeffrey J. Weiss
Street Address (P.O. Box Number is Not Acceptable)
21034 Rosedown Court
City
Boca Raton State
FL Zip
33433

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-12-03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP P WEISS, JEFFREY J. 21237 HARROW COURT BOCA RATON FL 33433	TITLE NAME STREET ADDRESS CITY-ST-ZIP P Jeffrey J. Weiss 21034 Rosedown Ct. Boca Raton, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-03 561-994-9077

Date

Daytime Phone #

CR2E034 (10/02)