

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 196169

1. Entity Name

SUNAIR ELECTRONICS, INC.

Principal Place of Business

3101 S W 3RD AVE  
FT LAUDERDALE FL 33315

Mailing Address

3101 S W 3RD AVE  
FT LAUDERDALE FLA 33315-3317

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

FLEMING, O'BRYAN & FLEMING, P.A.  
500 EAST BROWARD BLVD.  
17TH FLOOR  
FT. LAUDERDALE FL 33394-3071

7. Name and Address of New Registered Agent

Name  
Willard D Dover.  
Street Address (P.O. Box Number is Not Acceptable)  
2601 E Oakland Park Blvd  
Suite 400  
City Ft Lauderdale FL Zip Code 33306

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/25/00

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

TITLE	T	<input type="checkbox"/> Delete
NAME	DURHAM, SYNOTT B.	
STREET ADDRESS	3101 SW 3RD AVENUE	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	
TITLE	D	<input type="checkbox"/> Delete
NAME	GEORGE F ARATA, JR	
STREET ADDRESS	3101 SW 3RD AVE	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	URICHO, ROBERT	
STREET ADDRESS	3101 SW 3RD AVE	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	AS	<input type="checkbox"/> Delete
NAME	URICHO, SHIRLEY	
STREET ADDRESS	3101 SW 3RD AVE	
CITY-ST-ZIP	FT LAUDERDALE FL 33315	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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
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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:

*Synott B. Durham* SYNOTT B. DURHAM

Date

Daytime Phone #

4/24/00 954-525-1505



DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)

**FILED**  
**Apr 27, 2000 8:00 am**  
**Secretary of State**

04-27-2000 90074 036 \*\*\*150.00