

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 321159

1. Entity Name

DERECKTOR-GUNNELL, INC.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90141 045 ***158.75

Principal Place of Business

Mailing Address

775 TAYLOR LANE
 DANIA FL 33004
 US

775 TAYLOR LANE
 DANIA FL 33004-2536
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1225610

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MELENDEZ, FRANK ESQ
 1900 CORPORATE BLVD., STE 400-E
 BOCA RATON FL 33431

Name

MIKE MOORE, ESQUIRE

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

701 BRICKELL AVENUE

SUITE 3000

City

MIAMI

FL

Zip Code
 33101

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)

4/28/00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete
 NAME GUNNELL, ELIAS I
 STREET ADDRESS 775 TAYLOR LANE
 CITY-ST-ZIP DANIA FL

TITLE P ☒ Change ☐ Addition
 NAME UDO WEIDAUER
 STREET ADDRESS 775 TAYLOR LANE
 CITY-ST-ZIP DANIA FLA. 33004

TITLE SD ☐ Delete
 NAME DERECKTOR, PAUL E
 STREET ADDRESS 311 E. BOSTON POST ROAD
 CITY-ST-ZIP MAMARONECK NY

TITLE TD ☐ Change ☒ Addition
 NAME DERECKTOR, THOMAS
 STREET ADDRESS 994 JEFFERSON STREET
 CITY-ST-ZIP FALL RIVER, MA. 02721

TITLE CEO ☐ Delete
 NAME DERECKTOR, ROBERT E
 STREET ADDRESS 775 TAYLOR LANE
 CITY-ST-ZIP DANIA FL

TITLE D ☐ Change ☒ Addition
 NAME ARCHIBALD COX
 STREET ADDRESS 630 FIFTH AVENUE
 CITY-ST-ZIP NEW YORK, NEW YORK 10111

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ 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 or without other like empowered.

SIGNATURE:

[Signature]

4/27/00

(954) 920-5756

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)