

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 343899 "AMENDED 2000 REPORT"

1. Entity Name

7200 CORP

FILED

00 APR -4 PM 12:12

Principal Place of Business 2775 W. OKEECHOBEE RD. HIALEAH FL 33010
Mailing Address 2775 W. OKEECHOBEE RD. HIALEAH FL 33010-1057

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1263902

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PRUSSIN, RUBIN
2775 W OKEECHOBEE RD
HIALEAH FL 33010

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

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

(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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME PRUSSIN, RUBIN
STREET ADDRESS 2775 W. OKEECHOBEE ROAD
CITY-ST-ZIP HIALEAH FL 33010 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME 100003241731--2
STREET ADDRESS -05/08/00--01010--001
CITY-ST-ZIP *****61.25 *****61.25

TITLE D
NAME PRUSSIN, OTTILIE
STREET ADDRESS 2775 W. OKEECHOBEE ROAD
CITY-ST-ZIP HIALEAH FL 33010 ☐ Delete

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

TITLE ST
NAME GINSBURG, MURRAY
STREET ADDRESS 2775 W. OKEECHOBEE ROAD
CITY-ST-ZIP HIALEAH FL 33010 ☐ Delete

TITLE SD
NAME GINSBURG, MURRAY
STREET ADDRESS 2775 W. OKEECHOBEE ROAD
CITY-ST-ZIP HIALEAH, FL 33010 ☒ Change ☐ Addition

TITLE D
NAME GINSBURG, MURRAY
STREET ADDRESS 2775 W. OKEECHOBEE ROAD
CITY-ST-ZIP HIALEAH FL 33010 ☒ Delete

TITLE T
NAME GINSBURG, ANDREW
STREET ADDRESS 2775 W. OKEECHOBEE ROAD
CITY-ST-ZIP HIALEAH FL 33010 ☐ Change ☒ Addition

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/00

Date

305 887-6570

Daytime Phone #

CR2E034 19/99