

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 423558**

1. Entity Name

EARL SCHEIB OF FLORIDA, INC.

Principal Place of Business

**8737 WILSHIRE BLVD
BEVERLY HILLS CA 90211**

Mailing Address

**P O BOX 92184
LOS ANGELES CA 90009-2184
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

95-2814902

Applied For

Not Applicable

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

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 NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
PDCE BEMENT, CHRISTIAN K 8737 WILSHIRE BLVD BEVERLY HILLS CA 90211	<input type="checkbox"/>		
D SEIGEL, DANIEL A 8737 WILSHIRE BLVD. BEVERLY HILLS CA 90211	<input checked="" type="checkbox"/>		
VSD SUNKIN, DAVID I 8737 WILSHIRE BLVD BEVERLY HILLS CA	<input type="checkbox"/>		
VCFT BRANCH, JOHN D 8737 WILSHIRE BLVD BEVERLY HILLS CA	<input checked="" type="checkbox"/>	VICE PRESIDENT, CFO CHARLES E. BARRANTES 8737 WILSHIRE BLVD., BEVERLY HILLS, CA 90211	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/>		
	<input type="checkbox"/>		

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: DAVID I. SUNKIN - CORPORATE SECRETARY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-01-00

Date

(310)652-4880

Daytime Phone #

CR2E034 (9/99)