

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90039 042 ***150.00

DOCUMENT # 492871

1. Entity Name

PCP, INC.

Principal Place of Business

Mailing Address

2155 INDIAN ROAD
WEST PALM BEACH FL 33409-3287
US

2155 INDIAN ROAD
WEST PALM BEACH FL 33409-3221
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

59-1639776

Applied For

Not Applicable

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

BERNSTEIN, JOEL
11900 BISCAYNE BLVD., SUITE 604
MIAMI FL 33181

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 COHEN, MARTIN
STREET ADDRESS 323 KELSEY PARK CIR.
CITY-ST-ZIP PALM BEACH GARDENS FL 33410 ☐ Delete

TITLE DV
NAME COHEN, MARTIN
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE STD
NAME WERNLUND, ROGER F.
STREET ADDRESS 2115 LAKE BASS CIRCLE
CITY-ST-ZIP LAKE WORTH FL 33461 ☐ Delete

TITLE DV
NAME WERNLUND, ROGER F.
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE V
NAME WERNLUND, ROGER F.
STREET ADDRESS 2115 LAKE BASS CIRCLE
CITY-ST-ZIP LAKE WORTH FL 33461 ☒ Delete

TITLE PD
NAME FERRARIO, BRUNO
STREET ADDRESS Viale Italia, 77, 20020 Lainate
CITY-ST-ZIP Milan, Italy ☐ Change ☒ Addition

TITLE VD
NAME LENT, RICHARD W.
STREET ADDRESS 440 MUIRFIELD DRIVE
CITY-ST-ZIP ATLANTIS FL 33462 ☒ Delete

TITLE S
NAME COCCIOLI, LUCA
STREET ADDRESS Viale Italia, 77, 20020 Lainate,
CITY-ST-ZIP Milan, Italy ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE D
NAME SUCCI, MARCO
STREET ADDRESS Viale Italia, 77, 20020 Lainate,
CITY-ST-ZIP Milan, Italy ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME OSTRANDER, CLINTON
STREET ADDRESS 2155 Indian Road
CITY-ST-ZIP West Palm Beach, FL 33409 ☐ Change ☒ Addition

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:

Martin J. Cohen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Martin J. Cohen

02/22/00

Date

561/683-0507

Daytime Phone #

CR2E034 (9/99)