

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 90408 040 ***550.00

DOCUMENT # 568179

1. Entity Name

MULAZ REALTY CORPORATION

Principal Place of Business

**C/O KIEFER, DONALD
P O BOX 833
ARCADIA FL 33821**

Mailing Address

**C/O KIEFER, DONALD
P O BOX 833
ARCADIA FL 33821**

2. Principal Place of Business

P.O. Box 511658

3. Mailing Address

P.O. Box 511658

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

PUNTA GORDA, FL.

City & State

PUNTA GORDA, FL.

4. FEI Number

59-1809815

Applied For

Not Applicable

Zip

33951

Country

USA

Zip

33951

Country

USA

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

**KIEFER, DONALD E
2596 MURPHY ST NW
ARCADIA FL 34266**

Name

**KIEFER, DONALD E.
2045 PALM HARBOR TERRACE**

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

City

PUNTA GORDA

FL

Zip Code

33982

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

Donald E. Kiefer, President

5/11/01

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, 2001 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 ☐ Delete
NAME **PDT**
STREET ADDRESS **KIEFER, DONALD E**
CITY-ST-ZIP **2596 MURPHY ST NW
ARCADIA FL 34266**

TITLE ☒ Change ☐ Addition
NAME **PDT**
STREET ADDRESS **KIEFER, DONALD E.**
CITY-ST-ZIP **2045 PALM HARBOR TERRACE
PUNTA GORDA, FL. 33982**

TITLE ☐ Delete
NAME **VPSO**
STREET ADDRESS **KANDEFER, KENNETH F**
CITY-ST-ZIP **2262 GULF GATE DR
SARASOTA FL**

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

TITLE ☐ Delete
NAME **VDAS**
STREET ADDRESS **HOLEMS, DAVID**
CITY-ST-ZIP **8922 CANNSTATT DR SE
HUNTSVILLE AL**

TITLE ☒ Change ☐ Addition
NAME **VDAS**
STREET ADDRESS **HOLMES, DAVID**
CITY-ST-ZIP **906 GROVE STREET
CHAPEL HILL N.C. 27514**

TITLE ☐ Delete
NAME **VD**
STREET ADDRESS **KIEFER, M CAROL**
CITY-ST-ZIP **2596 MURPHY ST NW
ARCADIA FL**

TITLE ☒ Change ☐ Addition
NAME **VD**
STREET ADDRESS **KIEFER, M. CAROL**
CITY-ST-ZIP **2045 PALM HARBOR TERRACE
PUNTA GORDA, FL. 33982**

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 empowerment.

SIGNATURE:

Donald E. Kiefer, President

5/11/01 941/505-9788

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)