

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90026 026 ***150.00

DOCUMENT # 587737

1. Entity Name

SEWELL AND COMPANY, PA

Principal Place of Business

Mailing Address

8080 PASADENA BLVD
PEMBROKE PINES FL 33024
US

8080 PASADENA BLVD
PEMBROKE PINES FL 33024-2515
US

2. Principal Place of Business

3. Mailing Address

7705 DAVIE ROAD EXT

7705 DAVIE ROAD EXT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HOLLYWOOD FL

City & State

HOLLYWOOD, FL

4. FEI Number

59-1848519

Applied For

Not Applicable

Zip

33024

Country

USA

Zip

33024

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

SEWELL, THOMAS E.
8080 PASADENA BLVD.
PEMBROKE PINES, FL LP 33024

Name

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

7705 DAVIE ROAD EXT

City

HOLLYWOOD

FL

Zip Code

33024

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

Thomas E Sewell

THOMAS E SEWELL PRESIDENT

4-10-00

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 SEWELL, THOMAS E.
STREET ADDRESS 8080 PASADENA BLVD..
CITY-ST-ZIP PEMBROKE PINES FL

☐ Delete

TITLE P. D.
NAME SEWELL, THOMAS E
STREET ADDRESS 7705 DAVIE ROAD EXT
CITY-ST-ZIP HOLLYWOOD, FL - 33024

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ 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:

Thomas E Sewell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-00

Date

954 432-3100

Daytime Phone #

CR2E034 (9/99)