

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 588655

1. Entity Name
COCO BAY, INC.

FILED
Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90013 031 ***550.00

Principal Place of Business

3818 NW 32 AVENUE
MIAMI FL 33142

Mailing Address

3818 NW 32 AVENUE
MIAMI FL 33142

2. Principal Place of Business

5101 NW 36 AVENUE

3. Mailing Address

Suite, Apt. #, etc.

City & State

MIAMI FL

Zip 33142

Country USA

Suite, Apt. #, etc.

City & State

MIAMI FL

Zip 33142

Country USA

4. FEI Number 59-1919898

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

MASH, STEPHEN T
1455 PARKSIDE CIRCLE S.
BOCA RATON FL 33486

Name STEPHEN T. MASH
Street Address (P.O. Box Number is Not Acceptable)
21530 LAGUNA DR
City BOCA RATON FL Zip Code 33433

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, type or print name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE 7/6/00

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 MASH, STEPHEN T
STREET ADDRESS 1455 PARKSIDE CIR S.
CITY-ST-ZIP BOCA RATON FL

TITLE PRESIDENT
NAME MASH, STEPHEN T.
STREET ADDRESS 21530 LAGUNA DR
CITY-ST-ZIP BOCA RATON FL 33433 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V.P.
NAME ALAN GUGUSH
STREET ADDRESS 15800 SW 16th ST
CITY-ST-ZIP COMBARKS PINES 33027 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V.P.
NAME BARRY LEVY
STREET ADDRESS 7624 SW 102nd Ave
CITY-ST-ZIP MIAMI FL 33173 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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 fee empowered.

SIGNATURE:


SIGNATURE (TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date 7/6/01 Daytime Phone # 305 637 0206

CR2E034 (5/00)