

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 679688

1. Entity Name

NATTAN, INC.

**FILED**  
**Apr 18, 2000 8:00 am**  
**Secretary of State**

04-18-2000 90195 041 \*\*\*150.00

Principal Place of Business

Mailing Address

37 STAR ISLAND  
 MIAMI BEACH FL 33139  
 US

200 S. BISCAYNE BLVD.  
 STE. 2420  
 MIAMI FL 33131-2329  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2049084

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MELAND, MARK S  
 2420 FIRST UNION FINANCIAL CENTER  
 200 S. BISCAYNE BOULEVARD  
 MIAMI FL 33131

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
PD	REIBER, NATHAN		
37 STAR ISLAND	11111 Biscayne Blvd.		
MIAMI BEACH FL	Miami, Fla. 33181		
SDT	REIBER, CAROLEE		
37 STAR ISLAND	11111 Biscayne Blvd.		
MIAMI BEACH FL	Miami, Fla. 33181		
V	MELAND, MARK S.		
200 S. BISCAYNE BOULEVARD, #2420			
MIAMI FL			

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

N. REIBER

April 11/00

Date

305-899 9205

Daytime Phone #

CR2E034 19/99