

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 852334

1. Entity Name

DOMEQ IMPORTERS INC.

**FILED**  
**Apr 25, 2000 8:00 am**  
**Secretary of State**

04-25-2000 90036 037 \*\*\*150.00

Principal Place of Business

Mailing Address

149 SOUND BEACH AVENUE  
OLD GREENWICH CT 06870

P.O. BOX 33006  
DETROIT MI 48232-5006  
US

2. Principal Place of Business

355 RIVERSIDE AVE

Suite, Apt. #, etc.

WESTPORT CT

City & State

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

06880

Country

FAIRFIELD

Zip

Country

4. FEI Number

13-3097971

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	JONES, MARTIN ARTHUR	
STREET ADDRESS	39 SILVER RIDGE COMMON	
CITY-ST-ZIP	WESTON CT 06883	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	CLARK, BLAIR	
STREET ADDRESS	3 WHEELER AVE TYLER'S GREEN	
CITY-ST-ZIP	BUCKINGHAMSHIRE EN HP10- 8EN	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	BELLINGER, KEITH	
STREET ADDRESS	53 MICHAEL ROAD	
CITY-ST-ZIP	STAMFORD CT 06903	
TITLE	CD	<input checked="" type="checkbox"/> Delete
NAME	MCCARTHY, GEORGE	
STREET ADDRESS	29 PLEASANT LANE	
CITY-ST-ZIP	GREENWICH CT 06830	
TITLE	S	<input type="checkbox"/> Delete
NAME	STANTON, DAVID	
STREET ADDRESS	1255 TANGLEWOOD COURT	
CITY-ST-ZIP	LASALLE ONTARIO CA N9-J2K3	
TITLE	D	<input type="checkbox"/> Delete
NAME	JELLISON, MICHAEL	
STREET ADDRESS	2001 TURNBERRY COURT	
CITY-ST-ZIP	SANTA ROSA CA 95403	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT/DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KEITH A. BELLINGER	
STREET ADDRESS	355 RIVERSIDE AVE	
CITY-ST-ZIP	WESTPORT CT 06880	
TITLE	TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	J. MICHAEL WOOTERS	
STREET ADDRESS	355 RIVERSIDE AVE	
CITY-ST-ZIP	WESTPORT CT 06880	
TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBERT SHEA	
STREET ADDRESS	355 RIVERSIDE AVE	
CITY-ST-ZIP	WESTPORT CT 06880	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 empowered.

SIGNATURE:

*DAVID M. STANTON*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
DAVID M. STANTON, SECRETARY

APR. 10. 2000

Date

313-965-6611

Daytime Phone #

CR2E034 (9/99)