

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A98000002565**

1. Entity Name  
**HOME DYNAMICS SUNRISE, LTD.**

FILED

00 FEB -7 PM 4:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
**7145 CRESCENT CREEK WAY  
COCONUT CREEK FL 33073**

Mailing Address  
**7145 CRESCENT CREEK WAY  
COCONUT CREEK FL 33073-3148**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**APPLIED FOR**

Applied For  
Not Applied For

Zip

Country

Zip

Country

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

**SCHACK, EDWARD J  
7695 SW 104 STREET, SUITE 210  
PINECREST FL 33156**

Name

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

**ED SCHACK  
7954 PINES BLVD  
PEMBROKE PINES, FL 33024**

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. Capital Contributions  
as Shown on record.

**\$500.00**

10. Amount of Capital Contributions  
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P98000095690**  
NAME **HOME DYNAMICS SUNRISE CORPORATION**  
STREET ADDRESS **7145 CRESCENT CREEK WAY**  
CITY - ST - ZIP **COCONUT CREEK FL 33073**

DOCUMENT #  
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STREET ADDRESS  
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13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

**7103 Crescent Creek Ln  
Coconut Creek, FL 33073**

**100003127991-1**

**02/08/00 01111 016**

**\*\*\*\*141.25 \*\*\*\*141.25**

14. I hereby certify that the information supplied with this form 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership, the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**1-22-00**

Date

**954-421-5400**

Daytime Phone #