

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2002 8:00 am
Secretary of State

03-28-2002 90840 001 ***600.00

0406597 AV

DOCUMENT # F00000007243

1. Entity Name
INVICTA CORPORATION

Principal Place of Business

~~1121 HOLLAND DRIVE~~
~~#32~~
BOCA RATON FL 33487

Mailing Address

~~1121 HOLLAND DRIVE~~
~~#32~~
BOCA RATON FL 33487

2. Principal Place of Business

1160 S. Rogers Circle

3. Mailing Address

1160 S. Rogers Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number **22-2946374**

Applied For
 Not Applicable

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

REILLY, WILLIAM J
1121 HOLLAND DRIVE
BOCA RATON FL 33487

Name

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

1160 S. Rogers Circle

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 *William J. Reilly*

Signature, typed or printed name of registered agent and file 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, 2002 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 **PCD** ☐ Delete
NAME **YUSTER, ALAN**
STREET ADDRESS **1121 HOLLAND DRIVE**
CITY-ST-ZIP **BOCA RATON FL**

TITLE ☒ Change ☐ Addition
NAME *1160 S. Rogers Circle*
STREET ADDRESS *1160 S. Rogers Circle*
CITY-ST-ZIP *1160 S. Rogers Circle*

TITLE **VD** ☐ Delete
NAME **REILLY, WILLIAM J**
STREET ADDRESS **1121 HOLLAND DRIVE**
CITY-ST-ZIP **BOCA RATON FL**

TITLE ☒ Change ☐ Addition
NAME *1160 S. Rogers Circle*
STREET ADDRESS *1160 S. Rogers Circle*
CITY-ST-ZIP *1160 S. Rogers Circle*

TITLE **CD** ☐ Delete
NAME **GLECKEL, LOUIS**
STREET ADDRESS **1121 HOLLAND DRIVE**
CITY-ST-ZIP **BOCA RATON FL 33487**

TITLE ☒ Change ☐ Addition
NAME *1160 S. Rogers Circle*
STREET ADDRESS *1160 S. Rogers Circle*
CITY-ST-ZIP *1160 S. Rogers Circle*

TITLE **D** ☐ Delete
NAME **PHILLIPS, CHARLES**
STREET ADDRESS **1121 HOLLAND DRIVE**
CITY-ST-ZIP **BOCA RATON FL**

TITLE ☒ Change ☐ Addition
NAME *1160 S. Rogers Circle*
STREET ADDRESS *1160 S. Rogers Circle*
CITY-ST-ZIP *1160 S. Rogers Circle*

TITLE **D** ☐ Delete
NAME **BROWN, KENNETH**
STREET ADDRESS **1121 HOLLAND DR #32**
CITY-ST-ZIP **BOCA RATON FL 33487**

TITLE ☒ Change ☐ Addition
NAME *1160 S. Rogers Circle*
STREET ADDRESS *1160 S. Rogers Circle*
CITY-ST-ZIP *1160 S. Rogers Circle*

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

William J. Reilly
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-5-02

561-945-9980

Date

Daytime Phone #

CR2E034 (9/01)