

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F49453**

1. Entity Name

**CORAL HARBOR PLAZA, INC.**

**FILED**  
**Jul 20, 2000 8:00 am**  
**Secretary of State**

07-20-2000 90019 040 \*\*\*150.00

Principal Place of Business

**505 SE 18TH ST  
FT LAUDERDALE FL 33316**

Mailing Address

**505 SE 18TH ST  
FT LAUDERDALE FL 33316**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**NOT APPLICABLE**

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

**FARRUGIA, JOSEPH  
505 SE 18TH ST  
FT LAUDERDALE, FL  
33316**

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 \$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 ☐ Delete  
NAME **SD**  
STREET ADDRESS **FARRUGIA, WILLIAM JOSEPH**  
CITY-ST-ZIP **505 SOUTHEAST 18TH ST  
FT LAUDERDALE FL**

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

TITLE ☐ Delete  
NAME **VTD**  
STREET ADDRESS **FARRUGIA, MARY ELIZABETH**  
CITY-ST-ZIP **505 SOUTHEAST 18TH ST  
FT LAUDERDALE FL**

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

TITLE ☐ Delete  
NAME **PD**  
STREET ADDRESS **FARRUGIA, JOSEPH**  
CITY-ST-ZIP **505 SOUTHEAST 18TH ST  
FT LAUDERDALE FL**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Joseph Farrugia 07-10-2000*

7-10-00

Dept of State

I just received a second notice for the 2000 Uniform Business Report. This year I did not receive a first notice, and did not think about it until I received the second one. We have been filing the report for many years + never been late. I spoke to Carol at the 850 488-7000 phone number. She advised us to explain we did not receive the first notice + to enclose the original \$150.00 check, this might be accepted, and that you would let us know. Thank you for your time.

Joseph Farnigie