

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F54125

1. Entity Name

NEPTON OF FLORIDA, INC.

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90006 023 ***150.00

Principal Place of Business

Mailing Address

720 ROY WALL BLVD
ROCKLEDGE FL 32955
US

720 ROY WALL BLVD
ROCKLEDGE FL 32955-6212
US

910 Blass + Frankel, PA

910 Blass + Frankel, PA

2. Principal Place of Business

One Southeast Third Ave.

3. Mailing Address

One Southeast Third Ave.

Suite, Apt. #, etc.
Suite 2130

Suite, Apt. #, etc.
Suite 2130

City & State
Miami, FL

City & State
Miami, FL

4. FEI Number 59-2139888

Applied For
Not Applicable

Zip
33131

Country
U.S.A.

Zip
33131

Country
U.S.A.

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

COPROLITE COPORATION

~~720 ROY WALL BLVD~~
~~MIAMI FL 33131~~

Name *COPROLITE CORPORATION*

Street Address (P.O. Box Number is Not Acceptable)
1 SE 3RD AVE. # 2130

City *MIAMI* FL Zip Code *33131*

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

Helvin F. Frankel, President 4/3/00

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

TITLE ☐ Delete
NAME PD
STREET ADDRESS BARNAVON, HAIM
CITY-ST-ZIP 720 ROY WALL BLVD
ROCKLEDGE FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS Rockledge, FL
CITY-ST-ZIP 32955

TITLE ☐ Delete
NAME VPAD
STREET ADDRESS JACKSON, CARLA
CITY-ST-ZIP 1 SE 3RD AVE 2130
MIAMI FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS *1 SE 3RD AVE # 2130*
CITY-ST-ZIP *MIAMI, FL 33131*

TITLE ☐ Delete
NAME SD
STREET ADDRESS CALVERT, YVONNE
CITY-ST-ZIP 1 SE 3RD AVE 2130
MIAMI FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS *1 S.E. 3RD AVE. # 2130*
CITY-ST-ZIP *MIAMI, FL 33131*

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 lines empowered.

SIGNATURE:

SIGNATURE OF HAIM BARNAVON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR President

Date

Daytime Phone #

CR2E034 (9/99)