2000 UNIFORM BUSINESS REPORT (UBR)

BIG PINE KEY FL 33043

9. This corporation is eligible to satisfy its Intangible

PRICE, RICHARD A.

BIG PINE KEY FL

PRICE, DAWN E.

<u>big pine key fi</u>

448 PINE LN

448 PINE LN

Tax filing requirement and elects to do so.

(See criteria on back)

Signature, typed or printed name of registered agent and title if applicable.

OFFICERS AND DIRECTORS

SIGNATURE.

11.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

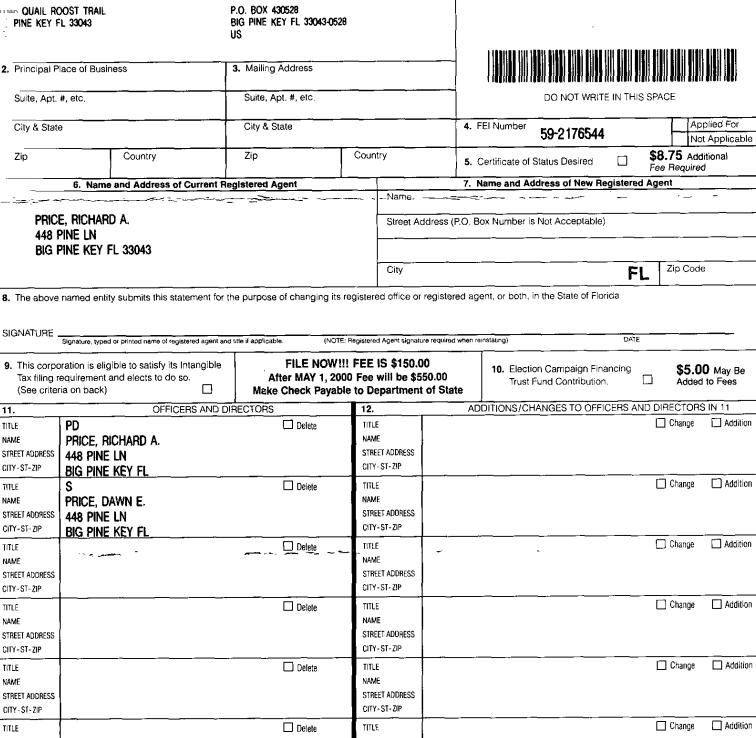
CITY-ST-7IP

CITY-ST-ZIP

Principal Place of Business			Mailing Address		
QUAIL ROOST TRAIL PINE KEY FL 33043			P.O. BOX 430528 BIG PINE KEY FL 33043-0528 US		
2.	Principal Place of Business Suite, Apt. #, etc. City & State		3. Mailing Address Suite, Apt. #, etc. City & State		
					4. FEIT
	Zip	Country	Zip	Country	5. Cert
	6. Name and Address of Current		urrent Registered Agent		7. Nam

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

03-07-2000 90100 018 ***150.00



indicated on this report or 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 suppliemental 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 appreciate with all other like empowered. 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

City

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

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12.

TITLE NAME

TITLE

NAME

TITLE

NAME

TITI F

NAME

TITLE NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE: