

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 14, 2000 8:00 am
Secretary of State

04-14-2000 90103 028 ***150.00

DOCUMENT # F93000005936

1. Entity Name

LAKEPOINTE ENVIRONMENTAL GROUP, INC.

Principal Place of Business

Mailing Address

2763 S.W. MATHESON AVE.
VILLA C
PALM CITY FL 34990

2763 S.W. MATHESON AVE.
VILLA C
PALM CITY FL 34990-2742

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5001 SW ORCHID BAY DRIVE - SAME

City & State

City & State

PALM CITY, FL

Zip 34990

Country USA

Zip

Country

4. FEI Number 73-1389873

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SERAFIN, JACOB R
2763 S.W. MATHESON AVE.
VILLA C
PALM CITY FL 34990

Name

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

5001 SW ORCHID BAY DRIVE

City

PALM CITY

FL

Zip Code

34990

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 Jacob R. Serafin

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

(NOTE: Registered Agent signature required when reinstating)

3/20/2000

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 P
STREET ADDRESS SERAFIN, JACOB R
CITY-ST-ZIP 2763 S.W. MATHESON AVE.
PALM CITY FL 34990

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 5001 SW ORCHID BAY DRIVE
CITY-ST-ZIP PALM CITY FL 34990

TITLE ☐ Delete
NAME S
STREET ADDRESS SERAFIN, SHARI L
CITY-ST-ZIP 7015 WATERWOOD WAY
OKLAHOMA CITY OK 72132

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 5001 SW ORCHID BAY DRIVE
CITY-ST-ZIP PALM CITY FL 34990

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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: Jacob R. Serafin President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JACOB R. SERAFIN

Date

3/20/2000

Daytime Phone #

CR2E034 (9/99)