

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000005124

1. Entity Name

PHOENIX WAREHOUSE, INC.

Principal Place of Business

2401 KERNER BLVD
SAN RAFAEL CA 94901

Mailing Address

2401 KERNER BLVD
SAN RAFAEL CA 94901-5569

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

68-0342931

Applied For

Not Applicable

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 \$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	PD	<input type="checkbox"/> Delete
NAME	CONSTANTIN, GUS	
STREET ADDRESS	2401 KERNER BLVD	
CITY-ST-ZIP	SAN RAFAEL CA 94901	
TITLE	SVPS	<input type="checkbox"/> Delete
NAME	PARKS, CYNTHIA E	
STREET ADDRESS	2401 KERNER BLVD	
CITY-ST-ZIP	SAN RAFAEL CA 94901	
TITLE	CTD	<input type="checkbox"/> Delete
NAME	SOLOVEI, HOWARD	
STREET ADDRESS	2401 KERNER BLVD	
CITY-ST-ZIP	SAN RAFAEL CA 94901	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	TONG, BRYANT J	
STREET ADDRESS	2401 KERNER BLVD	
CITY-ST-ZIP	SAN RAFAEL CA 94901	
TITLE	VD	<input type="checkbox"/> Delete
NAME	MARTINEZ, GARY	
STREET ADDRESS	2401 KERNER BLVD	
CITY-ST-ZIP	SAN RAFAEL CA 94901	
TITLE	VGS	<input type="checkbox"/> Delete
NAME	OLSEN, LISA	
STREET ADDRESS	2401 KERNER BLVD.	
CITY-ST-ZIP	SAN RAFAEL CA 94901	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LISA A. OLSEN

Date

1/20/00

Daytime Phone #

4154854500

CR2E034 (9/99)



DO NOT WRITE IN THIS SPACE

FILED

Feb 20, 2000 8:00 am
Secretary of State

02-20-2000 90006 008 ***150.00