## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # F96000002719 Apr 27, 2000 8:00 am Secretary of State 1. Entity Name PERRITT CAPITAL MANAGEMENT, INC. 04-27-2000 90081 016 \*\*\*150.00 Mailing Address Principal Place of Business 12514 STARKEY RD 12514 STARKEY RD LARGO FL 33773-2615 LARGO FL 33773 US HS 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 36-3538651 Not Applicable Country Zip \$8.75 Additional Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 5. Name and Address of Current Registered Agent Name PERRITT, GERALD W Street Address (P.O. Box Number is Not Acceptable) 12514 STARKEY RD LARGO FL 34843~ 33777 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Addition ☐ Delete TITLE ☐ Change TITLE NAME PERRITT, GERALD W NAME 8107 BARDMOOR PL #203E STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LARGO FL 33777 Change Addition ☐ Delete TITLE LATTZ, ROBERT NAME 1628 W BROWN ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF arlington HTS IL Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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

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