

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000006105

1. Entity Name

CENTAUR CONSULTING, INC.

P

FILED
Aug 22, 2000 8:00 am
Secretary of State

08-22-2000 90219 006 ***150.00

Principal Place of Business

9445 N MERIDIAN ST
INDIANAPOLIS IN 46260

Mailing Address

9445 N MERIDIAN ST
INDIANAPOLIS IN 46260

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

35-1371216

Applied For

Not Applicable

Zip

Country

Zip

Country

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

GRABILL, RON
5148 LITTLE BETH DR S
BOYNTON BCH FL 33437

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00.
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
NAME
STREET ADDRESS
CITY-ST-ZIP
DPT
COHEN, AARON Y
9445 N MERIDIAN ST
INDIANAPOLIS IN 46260 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
COHEN, CAROLYN
9445 N MERIDIAN ST
INDIANAPOLIS IN 46260 ☐ Delete

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: Aaron Y Cohen REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-12-00

Date

317-844-4467

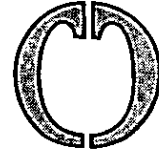
Daytime Phone #

CR2E034 (5/00)

Attachment Doc #
F9600000 6/1/95
A0073866

CENTAUR CONSULTING, INC.

POST OFFICE BOX 40444
INDIANAPOLIS, INDIANA 46240



August 15, 2000

Florida Department of State
Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

I received this Uniform Business Report a short time ago. In checking our files I found that we had been receiving a report and paying our fee in January – and only \$150.00. I called your department and talked to a gentleman named John and informed him I had not received this form for the January payment. He advised me to send the \$150.00 with a letter stating we had not received our report in January.

I am enclosing our check for \$150.00, and if you have any questions regarding this check or the form, please call me.

Sincerely,
CENTAUR CONSULTING, INC.

Janice Buddenbaum
Administrative Assistant