

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98111

1. Entity Name

FINGERHUT SECURITY CORPORATION, INC.

**FILED**  
**May 07, 2000 8:00 am**  
**Secretary of State**

05-07-2000 90022 003 \*\*\*150.00

Principal Place of Business

Mailing Address

707 CHILLINGWORTH DR

707 CHILLINGWORTH DR

WEST PALM BEACH FL 33409

WEST PALM BEACH FL 33409-4124  
 US

2. Principal Place of Business

480 EXECUTIVE CTR. DR.

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#2-K

City & State

City & State

WEST PALM BEACH, FL

Zip 33401-2981

Country USA

Zip

Country

4. FEI Number

59-2238949

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

Name

KEITH R. FINGERHUT

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

C/O ALPHA INSTITUTE

910 TENTH ST

City

LAKE PARK

FL

Zip Code

33403

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

TITLE DP  
 NAME FINGERHUT, KEITH R  
 STREET ADDRESS 480 EXECUTIVE CTR DR #2K  
 CITY-ST-ZIP W. PALM BCH FL 33401

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
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 STREET ADDRESS  
 CITY-ST-ZIP

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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:

KEITH FINGERHUT  
 PRESIDENT

4-23-2000 (561)  
 602-2165

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)