

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000000897

1. Entity Name

PROFESSIONAL BUSINESS OWNERS SOCIETY, INC.

FILED
Feb 26, 2000 8:00 am
Secretary of State

02-26-2000 90043 024 ***150.00

Principal Place of Business

1164 E. OAKLAND PARK BLVD.
FT. LAUDERDALE FL 33334

Mailing Address

1164 E. OAKLAND PARK BLVD.
FT. LAUDERDALE FL 33334-2764

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

36-4191705

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

BLOCKER, MARK L

757 SE 17TH ST. #340

FT. LAUDERDALE FL 33316

Name

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

1164 E. Oakland Park Blvd.

City

Fort Lauderdale

FL

Zip Code

33334

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

Mark L. Blocker

02/16/00

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	P	<input type="checkbox"/> Delete
NAME	BLOCKER, MARK L	
STREET ADDRESS	757 SE 17TH ST. - #340	
CITY-ST-ZIP	FT. LAUDERDALE FL 33316	
TITLE	S	<input type="checkbox"/> Delete
NAME	NUTTER, GARY D	
STREET ADDRESS	595 TALAVERA RD.	
CITY-ST-ZIP	WESTON FL 33326	

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	(Address)
STREET ADDRESS	1164 E. Oakland Park Blvd.
CITY-ST-ZIP	Fort Lauderdale, FL 33334
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	(Address)
STREET ADDRESS	1164 E. Oakland Park Blvd.
CITY-ST-ZIP	Fort Lauderdale, FL 33334

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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	

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

02/16/00

Date

Daytime Phone #

CR2E034 (9/99)