

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G07759

1. Entity Name

PRESENT AND PAST, INC.

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90014 011 ***155.00

Principal Place of Business

4326 PETERS RD.
FT. LAUDERDALE FL 33317

Mailing Address

4326 PETERS RD.
FT. LAUDERDALE FL 33317-4543

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 59-2241372

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEUTSCH, RICHARD
261 SW 75TH TERRACE
PLANTATION FL 33317

7. Name and Address of New Registered Agent

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

TITLE	PD	☐ De'ete
NAME	DEUTSCH, RICHARD	
STREET ADDRESS	261 SW 75TH TERRACE	
CITY-ST-ZIP	PLANTATION FL	
TITLE	STD	☐ De'ete
NAME	DEUTSCH, JANET	
STREET ADDRESS	261 SW 75TH TERRACE	
CITY-ST-ZIP	PLANTATION FL	
TITLE		☐ De'ete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ De'ete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ De'ete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ De'ete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ 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: *Janet E. Deutsch* *Janet E. Deutsch* 2-2-2000 954-584-2920
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)