

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H16271

1. Entity Name

GERARD GROUP, INC.

**FILED**  
**May 15, 2000 8:00 am**  
**Secretary of State**

05-15-2000 90169 045 \*\*\*150.00

Principal Place of Business

Mailing Address

2520 N POWERLINE RD  
 BAY 302  
 POMPANY BEACH FL 33069  
 US

P.O. BOX 810488  
 BOCA RATON FL 33427-2332  
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1360 SW 21 AVE

3. Mailing Address

PO BOX 272332

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BOCA RATON, FL

City & State

BOCA RATON, FL

4. FEI Number

59-2437975

Applied For

Not Applicable

Zip

Country

33486

USA

Zip

Country

33427

USA

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

BAL, GARY G.  
 1360 SW 21 AVE  
 BOCA RATON FL 33486

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
 NAME BAL, GARY G.  
 STREET ADDRESS 3349 NW 23 COURT  
 CITY-ST-ZIP BOCA RATON FL ☐ Delete

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS 1360 PARK AVE  
 CITY-ST-ZIP BOCA RATON, FL 33486

TITLE TSD  
 NAME BAL, DEBRA A.  
 STREET ADDRESS 3349 NW 23 COURT  
 CITY-ST-ZIP BOCA RATON FL ☐ Delete

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS 1360 PARK AVE  
 CITY-ST-ZIP BOCA RATON, FL 33486

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

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 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 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 line empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/26/00 501-362-6472

CR2E034 (9/99)