

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H53261

1. Entity Name

YOUTH INVESTMENTS, INC.

FILED
Jan 14, 2000 8:00 am
Secretary of State

01-14-2000 90062 011 ***158.75

Principal Place of Business

Mailing Address

LI'L RASCALS ACADEMY
1911 N. 66TH AVE.
HOLLYWOOD FL 33024

% DOUG MILLARD
1083 NW 97 AVE
PLANTATION FL 33322-4886
US

2. Principal Place of Business

3. Mailing Address

1121 NW 115 Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Plantation, FL ~~33322~~

4. FEI Number

59-2524009

Applied For

Not Applicable

Zip

Country

Zip

Country

33323

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

MILLARD, DOUGLAS S.
1083 NW 97 AVE
PLANTATION FL 33322

Name

Douglas S. Millard

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

1121 NW 115 Avenue

City

Plantation

FL

Zip Code

33323

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 P ☐ Delete
NAME MILLARD, DOUGLAS S.
STREET ADDRESS 1083 NW 97 AVE
CITY-ST-ZIP PLANTATION FL

TITLE P ☒ Change ☐ Addition
NAME Millard, Douglas S.
STREET ADDRESS 1121 NW 115 Avenue
CITY-ST-ZIP Plantation, FL 33323

TITLE S ☐ Delete
NAME MILLARD, BONNIE L.
STREET ADDRESS 1083 NW 97 AVE
CITY-ST-ZIP PLANTATION FL

TITLE S ☒ Change ☐ Addition
NAME Millard, Bonnie L.
STREET ADDRESS 1121 NW 115 Avenue
CITY-ST-ZIP Plantation, FL 33323

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/7/2000