

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State
 05-19-2002 90258 022 ***158.75

DOCUMENT # J00491

1. Entity Name
DAY-TONA SEABREEZE, INC.

Principal Place of Business

4851 KELLER SPRINGS RD
222
ADDISON TX 75001-5928
US

Mailing Address

4851 KELLER SPRINGS RD
222
ADDISON TX 75001-5928
US

360980



DO NOT WRITE IN THIS SPACE

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

75-2092401

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

ORFINGER, MICHAEL S
MONACO SMITH HOOD PERKINS LOUCKS & STOUT
444 SEABREEZE BLVD., SUITE 900
DAYTONA BEACH FL 32118

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **LITOFF, ELIOT**
STREET ADDRESS **4851 KELLER SPRINGS RD 222**
CITY-ST-ZIP **ADDISON TX 75001-5928**

☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS **Addison, TX 75001-6261**
CITY-ST-ZIP

TITLE **AS** ☐ Delete
NAME **LITOFF, CAROL**
STREET ADDRESS **4851 KELLER SPRINGS RD 222**
CITY-ST-ZIP **ADDISON TX 75001-5928**

☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS **Addison, TX 75001-6261**
CITY-ST-ZIP

TITLE **VSD** ☐ Delete
NAME **LITOFF, HAROLD**
STREET ADDRESS **84 SHIP STREET, UNIT F-1 EAST**
CITY-ST-ZIP **PROVIDENCE RI 02903**

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

TITLE ☐ Delete
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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

4/21/02

972-380-8933

Date

Daytime Phone #

CR2E034 (9/01)