

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90134 034 ***150.00

DOCUMENT# **J73152-✓**

1. Entity Name

Worth Commerce Park, Inc.

Principal Place of Business

**3208 2nd Ave N.
 Lake Worth, FL**

Mailing Address

**c/o Nancy Lauren
 15574 92nd Way N
 Jupiter, FL 33478**

C0060465

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

65-0059738

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**Nancy Lauren
 15574 92nd Way N
 Jupiter, FL 33478**

7. Name and Address of New Registered Agent

Name **Jim Vastarelli**
 Street Address (P.O. Box Number is Not Acceptable) **314 Fairway N.
 Tequesta**
 City **FL** Zip Code **33469**

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 **Jim Vastarelli**

4/10/01

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, 2001 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

PD Nancy Lauren Delete
 STREET ADDRESS **15574 92nd Way N**
 CITY-ST-ZIP **Jupiter, FL 33478**

VPD Delete
 NAME **Hernando Pineres**
 STREET ADDRESS **9650 S.W. 122 Ave.**
 CITY-ST-ZIP **MIAMI, FL 33186**

Delete

Delete

Delete

Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

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 like empowered.

SIGNATURE: **Nancy Lauren**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/01

Date

561-747-5761

Daytime Phone #

CR2E034 (1/00)