

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J81658

1. Entity Name

MARIE WULF ENTERPRISES, INC.

FILED
Apr 17, 2000 8:00 am
Secretary of State

04-17-2000 90050 050 ***150.00

Principal Place of Business

Mailing Address

% W. PETER SCHARF
12108 TIMBERLAKE ROAD
RIVERVIEW FL 33569

2701 MANOR HILL DRIVE
BRANDON FL 33511-7562
US

C0062151



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

2701 Manor Hill DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

BRANDON, FL

4. FEI Number 59-2818702

Applied For

Not Applicable

Zip
33511

Country

Zip

Country

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

SCHARF, W. PETER
2701 MANOR HILL DRIVE
BRANDON FL 33511

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 DP
NAME SCHARF, MARIE W.
STREET ADDRESS 2701 MANOR HILL DRIVE
CITY-ST-ZIP BRANDON FL ☐ Delete

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

TITLE D
NAME SCHARF, CHRISTINE S.
STREET ADDRESS 2701 MANOR HILL DRIVE
CITY-ST-ZIP BRANDON FL ☐ Delete

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

TITLE DV
NAME SCHARF, MICHAEL J.
STREET ADDRESS 2701 MANOR HILL DRIVE
CITY-ST-ZIP BRANDON FL ☐ Delete

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

TITLE DTS
NAME SCHARF, W. PETER
STREET ADDRESS 2701 MANOR HILL DRIVE
CITY-ST-ZIP BRANDON FL ☐ Delete

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 #

01-09-00

407-834-7142