## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED **DOCUMENT # J87210** Feb 15, 2000 8:00 am **Secretary of State** EMO CORPORATE SERVICES, INC. 02-15-2000 90037 023 \*\*\*150.00 Mailing Address Principal Place of Business % LEE W. HARVATH, JR. % LEE W. HARVATH. JR. 100 N.E.THIRD AVE.. SUITE 1100 100 N.E.THIRD AVE., SUITE 1100 FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301-1165 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0003600 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ENGLISH, MCCAUGHAN & O'BRYAN, P.A. Street Address (P.O. Box Number is Not Acceptable) 100 N.E. THIRD AVE. **SUITE 1100** FT. LAUDERDALE FL 33301 City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition PTD ☐ Delete TITLE TITI F NAME HARVATH, LEE W., JR. NAME STREET ADDRESS STREET ADDRESS 4130 NE 25TH AVE CITY-ST-ZIP CITY-ST-7IP FT. LAUDERDALE FL TITLE Change ☐ Addition ☐ Delete TITLE GRITTER, GERALD W. NAME NAME STREET ADDRESS 5416 N.E. 21 TERR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT.LAUDERDALE FL Change ☐ Addition ☐ Delete TITLE TITLE HUNTER, PATRICE A NAME NAME STREET ADDRESS 731 N.E. 47 COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OAKLAND PARK FL AS Delete Change ☐ Addition TITLE CHRYSTIE, DEBRA H NAME NAME STREET ADDRESS 9861 N ABAICA CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAVIE FL 33328 Change Addition AS ☐ Delete TITLE TITLE EMAS, MARSHALL J NAME NAME STREET ADDRESS STREET ADDRESS 100 NE 3RD AVE #1100 CiTY-ST-7IP CITY-ST-ZIP FORT LAUDERDALE FL 33301 Change ☐ Addition ☐ Delete TITLE TITLE KEISER, JUDITH L NAME STREET ADDRESS 100 NE 3RD AVENUE 31100 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33301 13. Thereby certify that the information supplied with this filling 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.

OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \_

LEE W. HARVATH, Jr.,

(954) 462-3300

2-2-00