

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90046 008 ***150.00

DOCUMENT # K01122

1. Entity Name

PRINCETON INDUSTRIES, INC.

Principal Place of Business

12550 NW 39TH STREET
CORAL SPRINGS FL 33065
US

Mailing Address

12550 NW 39TH STREET
CORAL SPRINGS FL 33065-2419
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0046690

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

BREWSTER, BRAD
12550 NW 39TH STREET
CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent

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

TITLE ☐ Delete
NAME **PD**
STREET ADDRESS **BREWSTER, BRADLEY W**
CITY-ST-ZIP **4908 NW 101 AVE**
CORAL SPRINGS FL 33076

TITLE ☐ Delete
NAME **TD**
STREET ADDRESS **BREWSTER, BRENT D**
CITY-ST-ZIP **4908 NW 101 AVE**
CORAL SPRINGS FL

TITLE ☐ Delete
NAME **VPD**
STREET ADDRESS **KAYE, MARC B**
CITY-ST-ZIP **11261 LAKEVIEW DR**
CORAL SPRINGS FL 33071

TITLE ☐ Delete
NAME **S**
STREET ADDRESS **KAYE, SUE L**
CITY-ST-ZIP **11261 LAKEVIEW DR**
CORAL SPRINGS FL 33071

TITLE ☐ Delete
NAME **VP**
STREET ADDRESS **EDUARDO**
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

TITLE ☐ Change ☒ Addition
NAME **VP**
STREET ADDRESS **EDUARDO ORTIZ**
CITY-ST-ZIP **4985 NW 82ND Terr**
Lauderh. H, FL 33351

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:

MANC B. KAYE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/18/00 **954 755 7614**