

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K10922

1. Entity Name

FLORIDA FINANCIAL CONCEPTS OF SOUTH FLORIDA, INC

FILED
May 12, 2000 8:00 am
Secretary of State

05-12-2000 90004 038 ***150.00

Principal Place of Business

Mailing Address

% JOYCE M. CARBONE
 1001 W CYPRESS CREEK RD 403
 FT LAUDERDALE FL 33309

% JOYCE M. CARBONE
 1001 W CYPRESS CREEK RD 403
 FT LAUDERDALE FL 33309-1951

2. Principal Place of Business

% JOYCE M. CARBONE

Suite, Apt. #, etc.

1600 S. FEDERAL HWY. STE. 900

City & State
 POMPANO BEACH, FL

Zip
 33062

Country
 U.S.A.

3. Mailing Address

% JOYCE M. CARBONE

Suite, Apt. #, etc.

1600 S. FEDERAL HWY. STE. 900

City & State
 POMPANO BEACH, FL

Zip
 33062

Country
 U.S.A.



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0041364

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

CARBONE, JOYCE M.
 1001 W CYPRESS CREEK RD 403
 FT LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

Name CARBONE, JOYCE M.

Street Address (P.O. Box Number is Not Acceptable)

1600 S. FEDERAL HWY. SUITE # 900

City POMPANO BEACH, FL

Zip Code 33062

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

X *Joyce M. Carbone*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/28/00

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 DP ☐ Delete
 NAME CARBONE, JOYCE M.
 STREET ADDRESS 1001 W CYPRESS CREEK RD
 CITY-ST-ZIP FT LAUDERDALE FL

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D.P. ☒ Change ☐ Addition
 NAME CARBONE, JOYCE M.
 STREET ADDRESS 1600 S. FEDERAL HWY. SUITE 900
 CITY-ST-ZIP POMPANO BEACH, FL 33062

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

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

TITLE ☐ Change ☐ Addition
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 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:

X *Joyce M. Carbone*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00
 Date

954 785 1515
 Daytime Phone #

CR2E034 (9/99)