

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K47529

1. Entity Name

ORFELY ENTERPRISES INC.

FILED

Jan 20, 2000 8:00 am  
Secretary of State

01-20-2000 90178 005 \*\*\*150.00

C0008546



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

15545 MIAMI LAKEWAY N  
204  
MIAMI LAKES FL 33014  
US

15545 MIAMI LAKEWAY N  
204  
MIAMI LAKES FL 33014-5553  
US

2. Principal Place of Business

15505 MIAMI LAKEWAY N  
Suite, Apt. #, etc.  
204  
City & State  
MIAMI LAKES, FL

3. Mailing Address

15505 MIAMI LAKEWAY N  
Suite, Apt. #, etc.  
204  
City & State  
MIAMI LAKES, FL

4. FEI Number

65-0093583

Applied For

Not Applicable

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

ORFELY, GEORGE P.  
15545 MIAMI LAKEWAY N #204  
MIAMI LAKES FL 33014

Name: George P ORFELY  
Street Address (P.O. Box Number is Not Acceptable)

15505 MIAMI LAKEWAY NORTH #204  
City: MIAMI LAKES FL Zip Code: 33014

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: ☐ Delete  
NAME: ORFELY, GEORGE  
STREET ADDRESS: 15545 MIAMI LAKEWAY N #204  
CITY-ST-ZIP: MIAMI LAKES FL

☒ Change ☐ Addition  
NAME: 15505 MIAMI LAKEWAY N #204  
STREET ADDRESS: MIAMI LAKES FL 33014  
CITY-ST-ZIP: MIAMI LAKES FL 33014

TITLE: ☐ Delete  
NAME: ORFELY, JOSEPH  
STREET ADDRESS: 15545 MIAMI LAKEWAY NORTH #204  
CITY-ST-ZIP: MIAMI LAKES FL 33014

☒ Change ☐ Addition  
NAME: 15505 MIAMI LAKEWAY N #204  
STREET ADDRESS: MIAMI LAKES FL 33014  
CITY-ST-ZIP: MIAMI LAKES FL 33014

TITLE: ☐ Delete  
NAME: ORFELY, MATTHEW  
STREET ADDRESS: 15545 MIAMI LAKEWAY NORTH #204  
CITY-ST-ZIP: MIAMI LAKES FL 33014

☒ Change ☐ Addition  
NAME: 15505 MIAMI LAKEWAY N #204  
STREET ADDRESS: MIAMI LAKES FL 33014  
CITY-ST-ZIP: MIAMI LAKES FL 33014

TITLE: ☐ Delete  
NAME: CAMPBELL, PAT  
STREET ADDRESS: 15405 MIAMI LAKEWAY N #303  
CITY-ST-ZIP: MIAMI LAKES FL 33014

☒ Change ☐ Addition  
NAME: 15505 MIAMI LAKEWAY N #204  
STREET ADDRESS: MIAMI LAKES FL 33014  
CITY-ST-ZIP: MIAMI LAKES FL 33014

TITLE: ☐ Delete  
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

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

TITLE: ☐ Delete  
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

☐ 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 #

CR2E034 (9/99)