

Feb 08, 2000 8:00 a
Secretary of State

02-08-2000 90173 024 ***300.00

DOCUMENT # K63395

1. Entity Name

E.E.R.S. INTERNATIONAL SALES, INC.

Principal Place of Business

Mailing Address

C/O CARL B. JACOBS
SUITE 308
FT. LAUDERDALE FL 33306
US3000 NE 30TH PLACE #308
SUITE 308
FT. LAUDERDALE FL 33306-1905
US

2. Principal Place of Business

3000 N.E. 30TH PL.

3. Mailing Address

SAME

Suite, Apt. #, etc.

STE 308

Suite, Apt. #, etc.

City & State

FT LAUDERDALE FL

City & State

4. FEI Number

65-0097112

Applied

Not

Zip

33306

Country

USA

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

JACOBS, CARL B.
3000 N.E. 30TH PLACE
SUITE 308
FT. LAUDERDALE FL 33306

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00
Added to F.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN

TITLE D PRESIDENT ☐ Delete
NAME JACOBS, CARL B.
STREET ADDRESS 3000 NE 30 PLACE #308
CITY-ST-ZIP FT. LAUDERDALE FL 33306TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE S.R. VICE PRESIDENT ☐ Change ☐
NAME FLORENCE BROMLEY
STREET ADDRESS 3000 N.E. 30TH PL. #308 11 YR
CITY-ST-ZIP FT. LAUDERDALE FL 33306TITLE ☐ Change ☐
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐
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, changed, or on an attachment with an address, with all other like information.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-1-00 9545614