

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K86041

1. Entity Name

GRASSETTE EQUIPMENT, INC.

Principal Place of Business

7037 SOUTHERN BLVD  
WEST PALM BEACH FL 33413  
US

Mailing Address

12856 75TH LANE N  
WEST PALM BEACH FL 33412-2286  
US

2. Principal Place of Business

6970 WALLIS ROAD

Suite, Apt. #, etc.  
1D

3. Mailing Address

Suite, Apt. #, etc.

City & State

WEST PALM BEACH, FL

City & State

4. FEI Number

65-0116054

Applied For

Not Applicable

Zip

33413

Country

Zip

Country

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GRASSETTE, GEOFFREY  
12586 75TH LN. NORTH  
WEST PALM BEACH FL 33412

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

*Geoffrey J. Grassetto*

GEOFFREY J. GRASSETTE, SR.

1/11/00

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	DPT	<input type="checkbox"/> Delete
NAME	GRASSETTE, SR. G	
STREET ADDRESS	12856 75TH LANE N	
CITY-ST-ZIP	WEST PALM BEACH FL 33412	
TITLE	DVS	<input type="checkbox"/> Delete
NAME	GRASSETTE, JOANNE	
STREET ADDRESS	12586 75TH LANE N	
CITY-ST-ZIP	WEST PALM BEACH FL 33412	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:

*Geoffrey J. Grassetto*

GEOFFREY J. GRASSETTE, SR.

1/11/00

(561) 684-0407

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)