

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02409

1. Entity Name

GASWORKS, INCORPORATED

FILED
Jan 27, 2000 8:00 am
Secretary of State

01-27-2000 90062 009 ***150.00

Principal Place of Business

1816 N. DIXIE HWY.
FT. LAUDERDALE FL 33305

Mailing Address

1816 N. DIXIE HWY.
FT. LAUDERDALE FL 33305-3849

2. Principal Place of Business

1101 NE 40TH CT

3. Mailing Address

1101 NE 40TH CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

OAKLAND PARK

City & State

OAKLAND PARK

4. FEI Number

65-0137298

Applied For

Not Applicable

Zip

Country

33334 USA

Zip

Country

33334 USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BEAN, KEVIN WARD
1816 N. DIXIE HIGHWAY
FT. LAUDERDALE FL 33305

7. Name and Address of New Registered Agent

Name

BEAN, KEVIN WARD

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

1101 NE 40TH CT SUITE 1

City

OAKLAND PARK FL

Zip Code

33334

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
BEAN, KEVIN WARD
1816 N. DIXIE HWY.
FT. LAUDERDALE FL 33305 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
LOTT, JOSEPH PATRICK
1816 N. DIXIE HWY.
FT. LAUDERDALE FL 33305 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1101 NE 40TH CT #1
OAKLAND PARK FL 33334 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1101 NE 40TH CT #1
OAKLAND PARK FL 33334 ☒ Change ☐ Addition

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

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

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

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

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)