

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L07614

1. Entity Name

C. P. AND G. DEVELOPMENT CORP.

R

FILED
Jul 18, 2000 8:00 am
Secretary of State

07-18-2000 90009 005 ***150.00

Principal Place of Business

10180 WEST BAY HARBOR DR. #6B
BAY HARBOR ISLANDS FL 33154

Mailing Address

10180 WEST BAY HARBOR DR. #6B
BAY HARBOR ISLANDS FL 33154

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0156111

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

POSNER, CAROLE

10180 WEST BAY HARBOR DR.
BAY HARBOR ISLANDS FL 33154

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 \$550.00 / 150⁰⁰
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 D
STREET ADDRESS POSNER, CAROLE
CITY-ST-ZIP 10180 WEST BAY HARBOR DR.
BAY HARBOR FL 33154

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

TITLE ☐ Delete
NAME D
STREET ADDRESS GASPARRI, ANGELO
CITY-ST-ZIP 5855 N.W. 42 WAY
BOCA RATON FL 33496

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CAROL POSNER

7/21/00

Date

305-861-2001

Daytime Phone #

L07614

A0067885

CP & G **DEVELOPMENT CORPORATION**

10180 WEST BAY HARBOR DR, BAY HARBOR ISLANDS FL 33154

JULY 11, 2000

FLORIDA DEPT OF STATE
DIVISION OF CORPORATIONS

ATT:KATHERINE HARRIS

DEAR MS. HARRIS;

ENCLOSED PLEASE FIND CHECK FOR \$150.00 TO COVER THE
CORPORATE RENEWAL FEE FOR THE YEAR 2000. A FIRST NOTICE WAS NEVER RECEIVED
FOR THIS FEE, AND I WAS ADVISED BY YOUR OFFICE TO RETURN THE FORM WITH THIS
\$150.00 TO INSURE PROPER STANDING AS A CORPORATION.

I TRUST THIS MATTER IS SATISFACTORY AND NO FURTHER ACTION IS REQUIRED.

THANK YOU.

SINCERELY,



CAROLE POSNER, PRESIDENT
C.P.&G DEVELOPMENT CORPORATION