## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # L11892**

KROHN, MARK

SIGNATURE

11.

TITLE

NAME

TITLE NAME

TITLE NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

370 ANSIN BLVD HALLANDALE FL 33009

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

KROHN, DANIEL

370 ANSIN BLVD

HALLANDALE FL 33009

(See criteria on back)

DPS

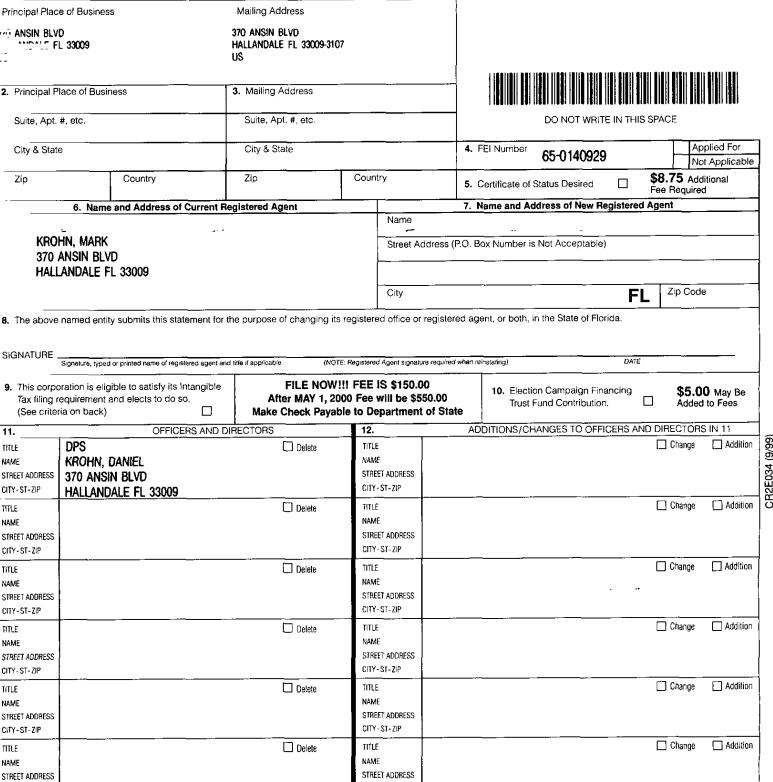
WEDGEWOOD ASSOCIATES, INC. Principal Place of Business Mailing Address 370 ANSIN BLVD ANSIN BLVD \*!5\*1.5 FL 33009 HALLANDALE FL 33009-3107 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Country Zip Country Zip 6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

## FILED Jan 20, 2000 8:00 am Secretary of State

01-20-2000 90216 003 \*\*\*150.00



13. I hereby certify that the information supplied with this filling 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 intrue 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 any attachment with an address, with all officer like empowered.

Name

City

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Delete

Delete

☐ Delete

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12.

TITLE

NAME

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

CITY-ST-78P

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

w PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND

(ROHN PRESIDENT 01/06/00 954 456-6066