

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L17882

1. Entity Name

GUTTA PERCHA, INC.

FILED

May 10, 2000 8:00 am
Secretary of State

05-10-2000 90158 001 ***450.00

Principal Place of Business

12769 WEST FOREST HILL
SUITE E
WELLINGTON FL 33414
US

Mailing Address

12769 WEST FOREST HILL
SUITE E
WELLINGTON FL 33414-4759
US

2. Principal Place of Business

12773 W. FOREST HILL

Suite, Apt. #, etc.

SUITE 1201

City & State

WELLINGTON FL

3. Mailing Address

12773 W. FOREST HILL

Suite, Apt. #, etc.

STE 1201

City & State

WELLINGTON FL

Zip

33414

Country

USA

Zip

33414

Country

USA

6. Name and Address of Current Registered Agent

HILDA M. PORRO, ESQ.
12769 W FOREST HILL
SUITE E
WELLINGTON FL 33414

7. Name and Address of New Registered Agent

Name

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

12773 W. FOREST HILL

SUITE 1201

City

WELLINGTON

FL

Zip Code

33414

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 **P** ☐ Delete
NAME **P. B. DYE**
STREET ADDRESS **12769 W FORREST HILL BLVD, SUITE E**
CITY-ST-ZIP **WELLINGTON FL**

TITLE **S** ☐ Delete
NAME **PORRO, HILDA M**
STREET ADDRESS **12769 W FOREST HILL BLVD SUITE E,**
CITY-ST-ZIP **WELLINGTON FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **12773 W. FOREST HILL STE 1201**
CITY-ST-ZIP **WELLINGTON, FL 33414**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **12773 W. FOREST HILL STE 1201**
CITY-ST-ZIP **WELLINGTON FL 33414**

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

TITLE ☐ Change ☐ Addition
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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

Date

Daytime Phone #

4-20-00 561-790-6733