

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L30719

1. Entity Name

200 HARVARD CORP.

**FILED**  
**Feb 01, 2000 8:00 am**  
**Secretary of State**

02-01-2000 90008 014 \*\*\*150.00

Principal Place of Business  
810 NE 20TH AVE  
FORT LAUDERDALE FL 33304  
US

Mailing Address  
810 SE 20TH AVE  
FORT LAUDERDALE FL 33304-3036  
US

00011001

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
810 NE 20TH AVE  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State  
FORT LAUDERDALE, FL

Zip  
33304-3036

Country  
USA

4. FEI Number 65-0168834  
Applied For  
Not Applied

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

PARKER, RAYMOND  
810 NE 20TH AVE.  
FORT LAUDERDALE FL 33304

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
PD	PARKER, RAYMOND		
810 NE 20TH AVE			
FORT LAUDERDALE FL			
VD	PEACOCK, ELSA		
25051 ASCOT LAKE CT			
BONITA SPRINGS FL 34134			
TS	BRENNAN, ROBERT		
810 NE 20TH AVE			
FORT LAUDERDALE FL			

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:

*Raymond C. Parker*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RAYMOND C. PARKER, PRESIDENT

1/21/00 (954) 768-0274  
Date Daytime Phone #