

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L32575

1. Entity Name

DISCOVERY GIDE, INC.

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90113 013 ***150.00

Principal Place of Business

Mailing Address

410 S. GYPRESS RD.
SUITE 109
POMPANO BEACH FL 33060

POSTAL DRAWER 50010
LIGHTHOUSE POINT FL 85710-5635

2. Principal Place of Business

3. Mailing Address

830 S. Calle del Sol

P.O. Box 13008

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Tucson, AZ

Tucson AZ

Zip

Country

Zip

Country

85710

U.S.A.

85732-3008

U.S.A.

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEAN, DONALD A.
410 S. GYPRESS RD., SUITE 109
POMPANO BEACH FL 33064

Name Dean Donald A.

Street Address (P.O. Box Number is Not Acceptable)
c/o 2800 W. OAKLAND PK BL 109

City Ft LAUDERDALE FL Zip Code 33311

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

Donald A. Dean

March 1, 2000

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

TITLE	D	<input type="checkbox"/> Delete
NAME	DEAN, DONALD	
STREET ADDRESS	410 S. GYPRESS ROAD, SUITE 109	
CITY-ST-ZIP	POMPANO BEACH FL 33064	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	830 S. CALLE DEL SOL	
CITY-ST-ZIP	TUCSON, AZ 85710	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Donald A. Dean

March 1, 2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2000-0124 (0000)