2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

ME

FILED DOCUMENT # **L41806** Mar 14, 2000 8:00 am **Secretary of State** FLANAGAN FAMILY ENTERPRISES, INC. 03-14-2000 90063 023 ***150.00 Principal Place of Business Mailing Address 12905 SW 103 COURT 12905 SW 103 COURT MIAMI FL 33176-5533 MIAMI FL 33176 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suitė, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 65-0185444 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JAMES P. FLANAGAN Street Address (P.O. Box Number is Not Acceptable) 12905 SW 103 COURT **MIAMI FL 33176** 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition TITLE PD ☐ Delete TITLE FLANAGAN, JAMES, P MAME NAME STREET ADDRESS STREET ADDRESS 12905 S.W. 103 COURT CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Change ☐ Addition ☐ Delete TITLE TITLE ZEBROWSKI, KATHLEEN NAME STREET ADDRESS STREET ADDRESS 731 S.W. 158 LANE CITY-ST-ZIP CITY-ST-ZIP SUNRISE FL ☐ Change Addition ☐ Delete TITLE SLAWITSCHKA, MAUREEN NAME STREET ADDRESS STREET ADDRESS 5254 ROSSER ROAD CITY-ST-ZIP CITY-ST-ZIP STONE MOUNTAIN GA Change Addition ☐ Delete TITLE TITLE NAME NAME PARENTE, EILEEN, F STREET ADDRESS STREET ADDRESS 1131 N.W. 118 AVE. CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 empowe

AND GAN