

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 16, 2000 8:00 am
Secretary of State

08-16-2000 90003 034 ***150.00

DOCUMENT # L43365

1. Entity Name
POINTE CHASE SALES CORPORATION

Principal Place of Business
**22683 MERIDIANA DR.
 BOCA RATON FL 33433**

Mailing Address
**22683 MERIDIANA DR.
 BOCA RATON FL 33433**

ADDU000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0168364**

Applied For
 Not Applicable

Zip Country

Zip Country

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

**LEVINE, MARVIN H.
~~11211 G. MILITARY TRAIL~~
~~APT 1213~~
~~BOYTON BEACH FL 33438~~**

**23440 MIRABELLA CIR
 BOCA RATON FL
 33433**

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	LEVINE, MARVIN H.	
STREET ADDRESS	2268 MERIDANA DR	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
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TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		

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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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:

REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARVIN LEVINE

8-9-00
 Date

1-561-3681911
 Daytime Phone #

CR2E034 (5/00)

93 attachment # 243365

A0072699

081400

FOR DEPOSIT ONLY
DEPT BANKING & FINANCE
NATIONSBANK TALLAH FL
063105683
Location 4400 1009068372
8 000353 800606 800606
2000-03-01

333

2283 17083

100-27-02

NATIONSBANK
TALLAHASSEE
FLORIDA
37405507

Attachment

Doc# L43365

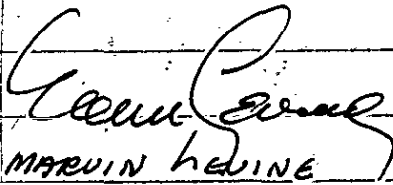
081400

A0072699

The duplicate payment.

I would like to receive a letter from you stating that this matter has been completely satisfied and that it is behind us.

Sincerely



MARVIN LEVINE

PRESIDENT

A0072699

081400

Division of Corporation
 Uniform Business Report Filing
 P.O. Box 1500
 Tallahassee, Fla. 32302

Gentlemen:

There seems to be some discrepancy with regards to our filing a "Uniform Business Report" for our Corporation Pacific Chase Sales located at 22683 Henderson Drive, Boca Raton, Fla. 33433.

Our accountant indicated, in late February, that we owed the State of Florida for the purpose of continuing our Corporation status. Check # 1606 was issued on 2/28/00 in the sum of \$150.00 payable to the Comptroller of Florida. Enclosed you will find a copy of both the front and back of that check.

Within the past few weeks we received a form known as "2000 Uniform Business Report" with instructions that it must be paid by 9/13/00 or an additional fee of \$600.00 would be added as a late fee.

We have not received any other notices, and as a result to be sure we are not penalized, I am enclosing the form, properly signed, with another check for \$150.00.

We ask that you please look into this matter thoroughly and if the second \$150.00 check is a duplicate, please issue us a credit for

23 attachment # 43345

POINTE CHASE SALES CORP.

A0072699

1606 081400

DATE FEB 28 2008

63-27/631 FL 824

COMPTROLLER OF FLORIDA

\$ 150 ⁰⁰/₁₀₀

PAY TO THE ORDER OF

One hundred and fifty ⁰⁰/₁₀₀

DOLLARS

NationsBank

NationsBank, N.A.

ACH R/T 063100277

Comptroller

FOR License - (2)

⑈001606⑈ ⑆063100277⑆ 00360419815⑈ ⑈0000015000⑈