

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90025 013 ***150.00

DOCUMENT # L48115

1. Entity Name

SPACE COAST DISTRIBUTORS OF CENTRAL FLORIDA, INC

Principal Place of Business

**C/O THEODORE BONDJUK
1725 S NOVA RD #B5
S DAYTONA FL 32119**

Mailing Address

**C/O THEODORE BONDJUK
1725 S NOVA RD #B5
S DAYTONA FL 32119**

2. Principal Place of Business

726 N. Segrave St.

3. Mailing Address

726 N. Segrave St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Daytona Beach FL.

City & State

Daytona Beach FL.

Zip

32114

County

Volusia

Zip

32114

County

Volusia

6. Name and Address of Current Registered Agent

**BONDJUK, THEODORE
1725 S NOVA RD #B5
SOUTH DAYTONA FL 32119**

7. Name and Address of New Registered Agent

Name **Theodore Bondjuk**
Street Address (P.O. Box Number is Not Acceptable)

726 N. Segrave St.

City **Daytona Beach**

FL

Zip Code

32114

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 **Theodore Bondjuk**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-6-01

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, 2001 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	BONDJUK, THEODORE	1302 VANDERBILT DR.	ORMOND BEACH FL	
V	BONDJUK, CONSTANTINE	1218 RIVERBREEZE DRIVE	ORMOND BEACH FL	
S	BONDJUK, PATRICIA	1218 RIVERBREEZE DR	ORMOND BEACH FL	
T	BONDJUK, SUGAR	1302 VANDERBILT DR	ORMOND BEACH FL	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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:

Theodore Bondjuk

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-6-01

Daytime Phone #

3862390670

CR2E034 (10/00)