

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L58617

1. Entity Name

THE ORIGINAL BONO'S, INC.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90039 019 ***150.00

Principal Place of Business

Mailing Address

5730 BOWDEN RD. #307
JACKSONVILLE FL 32216

10645 PHILLIPS HWY
BLDG 200
JACKSONVILLE FL 32256-1443

2. Principal Place of Business

10645 Philips Hwy

3. Mailing Address

Suite, Apt. #, etc.

City & State

Suite, Apt. #, etc.

Bldg 200

City & State
Jacksonville FL

Zip
32256-1443

Country
Duval

Zip

Country

4. FEI Number 59-3000628

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LEVY, ISAAC L.
1513 SAN MARCO BLVD.
JACKSONVILLE FL 32207

7. Name and Address of New Registered Agent

Name
RICHARD K. JONES

Street Address (P.O. Box Number is Not Acceptable)
MOSELEY, WARREN, PRICHARD & PARRISH

501 WEST BAY STREET

City
JACKSONVILLE

FL

Zip Code
32202

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

4-19-00

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

TITLE D ☐ Delete
NAME ADEEB, JOSEPH III
STREET ADDRESS 10645 PHILLIPS HWY BLDG 200
CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE D ☐ Delete
NAME PUTNAM, RICHARD
STREET ADDRESS 10645 PHILLIPS HWY BLDG 200
CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Change ☐ Addition
NAME Putnam, Richard
STREET ADDRESS 7872 James Island Way
CITY-ST-ZIP Jacksonville, FL 32256

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

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

4/24/2000

Date

904-880-8310

Daytime Phone #