

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L81516

1. Entity Name

E.K.O. ENTERPRISES, INC.

FILED
Feb 23, 2000 8:00 am
Secretary of State

02-23-2000 90024 046 ***150.00

Principal Place of Business

Mailing Address

100 RIVER BRIDGE BLVD
WEST PALM BCH FL 33413
US

68 MIDWOOD LANE
BOYNTON BEACH FL 33436-9005
US

916305

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0202569

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

MORICI, ALFRED G.
COHEN & ARANSON
102 N SWINTON AVE
DELRAY BCH FL 33444

Name

Earl K. Oltzky

Street Address (P.O. Box Number is Not Acceptable)

68 Midwood Lane

City

Boynton Beach

FL

Zip Code

33436

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

Earl K. Oltzky

Earl K. Oltzky

2/17/00

Signature, typed or printed name of registered agent and board 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 ☐ Delete
NAME D
STREET ADDRESS OLITZKY, EARL
CITY-ST-ZIP 298 WOOD DALE DR.
WEST PALM BEACH FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
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TITLE ☐ Change ☐ Add
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Earl K. Oltzky

Earl K. Oltzky

2/17/00

561-795-7

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #