## 2000 UNIFORM BUSINESS REPORT (UBR)

## OCUMENT # N9600000540

Entity Name

## MIAMI/VIRGIN ISLANDS MOCKO JUMBIE STILT DANCERS

FILED May 12, 2000 8:00 am Secretary of State

05-12-2000 90048 014 \*\*\*\*61.25

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			ř.			<b>812 (24) 8 3</b> 7) ( <b>85</b> ) ( <b>85</b> ) ( <b>8</b>			
Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State			4. FEI Number	NOT APPLICA	ABLE	<u> </u>	pplied For ot Applicable
Zip	Country	Zip	Cour	ntry	<del></del>	of Status Desired		\$8.75 Ad	ditional
<del></del>		Tarletaned Arena	<del></del>		7 Name and	Address of New Se	mintoro d		<del></del>
	6. Name and Address of Current	t Hegistered Agent		Name	7. Name and	Address of New Re	gisterea	Agent	. — —
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Brooks, \				Street Addre	ess (P.O. Box Numbe	er is Not Acceptable)	, , <u> </u>		
10455 S.W. 146TH TERRACE MIAMI FL 33176						<u> </u>			
			ſ	City			FL	Zip Coc	ie
	named entity submits this statement f								
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_ AAULAN. S	Signature, typed or printed name of registered agen	at and title if applicable. (NO	TE: Registered	Agent signature re-	quired when reinstating)	<del>_</del>	DATE	-	
	Signature, typed or printed name of registered agen	and title if applicable. (NO	TE: Registered	Agent signature re	quired when reinstating)		DATE		
		t and title if applicable. (NO	<u></u>			Make		Payable to	0
	Signature, typed or printed name of registered agen  PILE NOW:  FEE IS \$61.25		in Financin	ng _ \$	5.00 May Be		Check	Payable to	0
	FEE IS \$61.25	9. Election Campaig Trust Fund Contrib	in Financin bution.	ng _ \$	5.00 May Be dded to Fees	Dep	Check ertmen	t of State	
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. 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 of your policy 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 feceiver or frustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

IGNATURE

GIGHTUDE PEQUIRED

4-26-00 (95-1) 456-2600