## 2000 UNIFORM BUSINESS REPORT (UBR)

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

## DOCUMENT # P00000000862

1. Entity Name

2. Principal Place of Business

ROSEN, JEROME L

7880 N UNIVESITY DR TAMARAC FL 33321

Suite, Apt. #, etc.

City & State

Zip

ADJUSTERS GROUP 2000, INC.

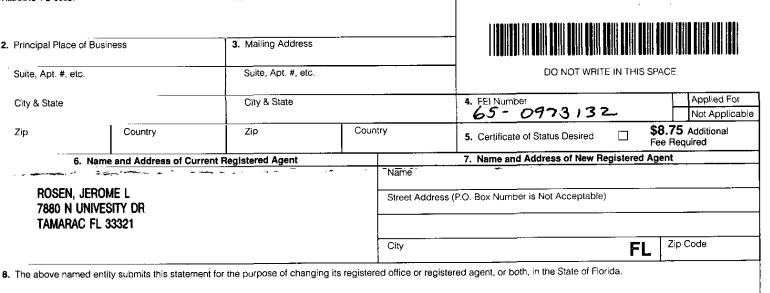
Mailing Address Principal Place of Business 7880 N UNIVESITY OR 7880 N UNIVESITY DR IAMAHAG FL 33321 TAMARAC FL 33321

Country

6. Name and Address of Current Registered Agent

## **FILED** Feb 29, 2000 8:00 am **Secretary of State**

02-29-2000 90091 048 \*\*\*150.00



SIGNATURE .	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE:	Registered Agent signature required when r	reinstating) DA	NTE	<del></del>
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)		FILE NOW!!! After MAY 1, 200	FEE IS \$150.00 0 Fee will be \$550.00 e to Department of State	10. Election Campaign Financing Trust Fund Contribution  \$5.00 May B Added to Fees		May Be I to Fees
11. OFFICERS AND DIRECTORS		<b>12.</b> Al	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, BARRY 7880 N UNIVESITY DR TAMARAC FL 33321	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition
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Country

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 ith all other like empowered.

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR