

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 23, 2001 08:00 AM**
Secretary of State**DOCUMENT # P00000014921**1. Entity Name
PRIVATE - CHARTER.COM, INC.

Principal Place of Business

5892 SUNDANCE CT.

JUPITER
33458

FL

Mailing Address

5892 SUNDANCE CT.

JUPITER
33458

FL

2. Principal Place of Business

4300 S. US HWY 1

Suite, Apt. #, etc.
#203-347City & State
JUPITER

FL

Zip
33477

Country

3. Mailing Address

4300 S. US HWY 1

Suite, Apt. #, etc.
#203-347City & State
JUPITER

FL

Zip
33477

Country

4. FEI Number

65-0989734

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

HOURANEY MARK
5892 SUNDANCE CT.JUPITER
33458

FL

7. Name and Address of New Registered Agent

Name

HOURANEY MARK

Street Address (P.O. Box Number is Not Acceptable)
4300 S. US HWY 1

#203-347

City

JUPITER

FL

Zip Code
33477

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 **MARK HOURANEY**

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

(NOTE: Registered Agent signature required when reinstating)

02/23/2001

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOURANEY MARK
STREET ADDRESS	4300 S. US HWY 1 #203-347
CITY-ST-ZIP	JUPITER FL 33477
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: **Mark Houraney**

CP

02/23/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)