

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State

04-25-2001 90162 004 ***150.00

DOCUMENT # P00000024494

1. Entity Name

GRUBBE FAMILY ENTERPRISES, INC.

Principal Place of Business

Mailing Address

3847 SOUTH CIRCLE DRIVE #17
HOLLYWOOD FL 330213847 SOUTH CIRCLE DRIVE #17
HOLLYWOOD FL 33021

2. Principal Place of Business

3. Mailing Address

411 N. DONNELLY ST.
Suite Apt. #, etc.
#107

Suite, Apt. #, etc.

City & State

City & State

MOUNT DORA, Florida

Zip

Country

Zip

Country

32757

USA

4. FEI Number

65-0988430

Applied For

Not Applicable

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

COHN, ALAN B
2021 TYLER STREET
HOLLYWOOD FL 33020

Name

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

City

FL

Zip Code

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

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 State10. 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

D

☐ Delete

NAME

GRUBBE, ROSEMARY A

STREET ADDRESS

3847 SOUTH CIRCLE DRIVE #17

CITY-ST-ZIP

HOLLYWOOD FL 33021

TITLE

D

☐ Delete

NAME

GRUBBE, CYNTHIA L

STREET ADDRESS

3847 SOUTH CIRCLE DRIVE #17

CITY-ST-ZIP

HOLLYWOOD FL 33021

TITLE

D

☐ Delete

NAME

GRUBBE, ROBERT G

STREET ADDRESS

3847 SOUTH CIRCLE DRIVE #17

CITY-ST-ZIP

HOLLYWOOD FL 33021

TITLE

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NAME

STREET ADDRESS

CITY-ST-ZIP

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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:

Rosemary A Grubbe

ROSEMARY A. GRUBBE 4/18/01 (954) 981-0121

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (10/00)