

# 2001 UNIFORM BUSINESS REPORT (UBR)

4/1

FILED

May 05, 2001 8:00 am  
Secretary of State

04-17-2001 90109 030 \*\*\*150.00

DOCUMENT # P00000041014

1. Entity Name

MULHOLLAND INDUSTRIES, INC.

Principal Place of Business

21406 SWEETWATER LANE NORTH  
BOCA RATON FL 33428

Mailing Address

21406 SWEETWATER LANE NORTH  
BOCA RATON FL 33428

2. Principal Place of Business

21406 Sweetwater Lane Suite, Apt. #, etc.

3. Mailing Address

same Suite, Apt. #, etc.

City & State

Boca Raton FL  
33428 USA

City & State

Zip Country

4. FEI Number

65-1012714

Applied For

Not Applicable

5. Certificate of Status Desired

8 \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MULHOLLAND, WILLIAM F  
21406 SWEETWATER LANE NORTH  
BOCA RATON FL 33428

7. Name and Address of New Registered Agent

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 State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME William Mulholland ☐ Delete  
STREET ADDRESS 21406 Sweetwater Lane N.  
CITY-ST-ZIP Boca Raton, FL 33428

TITLE NAME Roseanne Mulholland ☐ Delete  
STREET ADDRESS 21406 Sweetwater Lane  
CITY-ST-ZIP Boca Raton, FL 33428

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS President  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS Vice President  
CITY-ST-ZIP

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

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

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

TITLE NAME ☐ Change ☐ Addition  
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:

William Mulholland  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)