

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000043431

1. Entity Name
NIFTYJUNK.COM, INC.

Principal Place of Business
12133 SW 102ND ST
MIAMI FL 33186

Mailing Address
12133 SW 102ND ST
MIAMI FL 33186

FILED
Mar 08, 2001 8:00 am
Secretary of State

03-08-2001 90078 040 ***158.75

00000011



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
13325 SW 124th St
Suite, Apt. #, etc.

3. Mailing Address
13325 SW 124th St
Suite, Apt. #, etc.

City & State
Miami, Florida

City & State
Miami, Florida

4. FEJ Number
65-1022820

Applied For
Not Applicable

Zip
33186

Country
USA

Zip
33186

Country
USA

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

LEWIS, HAROLD L ESQ
STE. 2400, ONE BISCAYNE TOWER
2 S. BISCAYNE BLVD
MIAMI FL 33131

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
P/T/S/D
Brian J. McCaul
13325 SW 124th St.
Miami, FL 33186

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

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

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: Brian McCaul Brian McCaul

3/6/01

305-766-2194

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)