

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000048851

1. Entity Name

MEGA LAND DEVELOPMENT, INC.

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90184 001 ***150.00

Principal Place of Business

P.O. BOX 290423
DAVIE FL 33329

Mailing Address

P.O. BOX 290423
DAVIE FL 33329

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1041459

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

GIBBONS, MARK
14530 MARVIN LANE
FT. LAUDERDALE FL 33330

Name

Richard Speer

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 of Registered Agent or Printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

1-24-01

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	D	<input type="checkbox"/> Delete
NAME	GIBBONS, MARK	
STREET ADDRESS	6111 SW 186TH WAY	
CITY-ST-ZIP	FT. LAUDERDALE FL 33332	
TITLE	D	<input type="checkbox"/> Delete
NAME	SPEER, RICHARD	
STREET ADDRESS	14530 MARVIN LANE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33330	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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

(Signature and Typed or Printed Name of Signing Officer or Director)

Rick Speer

Date

Daytime Phone #

1-24-01 954-252-9399

CR2E034 (10/00)