

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 20, 2001 8:00 am
Secretary of State

08-08-2001 90012 028 ***150.00

DOCUMENT # P00000060501

1. Entity Name

MERLINS ODD JOBS, INC.

Principal Place of Business

23025 ATLANTIC CIRCLE
BOCA RATON FL 33428

Mailing Address

23025 ATLANTIC CIRCLE
BOCA RATON FL 33428

2. Principal Place of Business

23025 ATLANTIC CIRCLE

3. Mailing Address

23025 ATLANTIC CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

BOCA RATON FL

City & State

BOCA RATON FL

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip

Country

33428

Palm Beach Co

Zip

Country

33428

Palm Beach Co

5. Certificate of Status Desired ☐
\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name: None

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

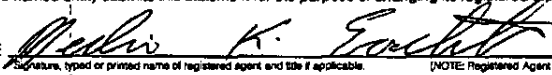
City

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

6-30-01

 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 \$550.00
After September 12, 2001 Fee will be \$750.00
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	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
PO	EVELETH, MERLIN K	23025 ATLANTIC CIRCLE	BOCA RATON FL 33428	☐
VO	EVELETH, DARLENE E	23025 ATLANTIC CIRCLE	BOCA RATON FL 33428	☐
ST	BERGMAN, NORA A	23025 ATLANTIC CIRCLE	BOCA RATON FL 33428	☐
				☐
				☐
				☐

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

CR2034 (5/01)

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

Date

Daytime Phone #

6-30-01

8-3-01

Dear Sirs

attachment

COO5123- #P000000001

The Menus received the
first form. I am sorry this is late
but Mr. Enelith's wife is dying
with cancer. And we have got to
a little behind.

I have you
Secretary
Nora A. Bergman

9