

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 02, 2001 8:00 am
Secretary of State

05-02-2001 90218 044 ***150.00

DOCUMENT # P00000070581

1. Entity Name
INVESTD.COM, INC.

Principal Place of Business
**3606 US HWY 19 N
NEW PORT RICHEY FL 34652**

Mailing Address
**3606 US HWY 19 N
NEW PORT RICHEY FL 34652**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7417 NATURE WALK DR
Suite, Apt. #, etc.

3. Mailing Address
7417 NATURE WALK DR
Suite, Apt. #, etc.

City & State
SPRING HILL, FL
Zip
34606
Country
USA

City & State
SPRING HILL, FL
Zip
34606
Country
USA

4. FEI Number ☒ Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**SCHRIVER, MICHAEL W
3606 US HWY 19 N
NEW PORT RICHEY FL 34652**

7. Name and Address of New Registered Agent

Name
CHAD ORSATTI & ASSOCIATES
Street Address (P.O. Box Number is Not Acceptable)

600 CLEVELAND STREET #1100
City
CLEARWATER FL Zip Code
33755

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 *Chad Orsatti*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/24/01
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
STREET ADDRESS
CITY-ST-ZIP
**PS
SCHRIVER, MICHAEL W
3606 US HWY 19 N
NEW PORT RICHEY FL 34652** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**JOHN MAGAZINE
7417 NATURE WALK DR
SPRING HILL, FL 34606** ☐ Change ☒ Addition

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

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

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

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

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: *John Magazine* **JOHN MAGAZINE**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/01 352-688-6044
Date Daytime Phone #

CR2E034 (10/00)