

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 15, 2002 8:00 am**  
**Secretary of State**

03-15-2002 90014 040 \*\*\*150.00

**DOCUMENT # P00000093603**

1. Entity Name

**DAYS GONE BY ANTIQUES & UNIQUES INC.**

Principal Place of Business

126 CENTER ST  
SUITE B-5  
JUPITER FL 33458

Mailing Address

126 CENTER ST  
SUITE B-5  
JUPITER FL 33458

2. Principal Place of Business

116 W. Beverly Rd

3. Mailing Address

116 W. Beverly Rd.

City & State

TEQUESTA, FL

City & State

TEQUESTA, FL

4. FEI Number

65-1044620

Applied For

Not Applicable

Zip

33469

Country

USA

Zip

33469

Country

33469

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

RIVET, DENISE G  
116 W. BEVERLY RD.  
TEQUESTA FL 33469

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

*Denise G. Rivet*

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, 2002 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 PS  
NAME RIVET, DENISE G  
STREET ADDRESS 116 W. BEVERLY RD  
CITY-ST-ZIP TEQUESTA FL 33469 ☐ Delete

TITLE VPT  
NAME RIVET, MISTY R  
STREET ADDRESS 116 W. BEVERLY RD  
CITY-ST-ZIP TEQUESTA FL 33469 ☐ 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 ☐ 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:

*Denise G. Rivet*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/1/02 (561)339-1780

0396438 AV

CR2E034 (9/01)