

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000115831

1. Entity Name

2000 SERVICES AND MORE, CORP.

**FILED**  
**Apr 03, 2003 8:00 am**  
**Secretary of State**

04-03-2003 90145 037 \*\*\*150.00

Principal Place of Business

Mailing Address

5151 W. CLUB CIRCLE #106  
BOCA RATON FL 33487

5151 W. CLUB CIRCLE #106  
BOCA RATON FL 33487

2. Principal Place of Business

5201 W. CLUB CIRCLE

3. Mailing Address

5201 W. CLUB CIRCLE

Suite Apt. #, etc.

202

Suite Apt. #, etc.

202

DO NOT WRITE IN THIS SPACE

City & State

BOCA RATON - FLORIDA

City & State

BOCA RATON - FLORIDA

4. FEI Number

65-1063983

Applied For

Not Applicable

Zip

33487

Country

USA

Zip

33487

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

TONETTI, MARCELO

5151 W CLUB CIRCLE 106

BOCA RATON FL 33487

7. Name and Address of New Registered Agent

Name

TAX HOUSE CORPORATION

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

531 E. SAMPLE ROAD

City

POMPANO BEACH

FL

Zip Code

33064

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)

01/31/03

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, 2003 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

D  
TONETTI, MARCELO  
5151 W CLUB CIRCLE 106  
BOCA RATON FL 33487

☐ Delete

12. ADDITIONS /CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D  
TONETTI, MARCELO  
5201 W. CLUB CIRCLE # 202  
BOCA RATON FL 33487

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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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 19.07(3)(1), 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 N 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

01/31/03

561 251-9390

Date

Daytime Phone #