

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91270 013 ***150.00

DOCUMENT # P01000064665

1. Entity Name

BOUNCING CASTLES RENTALS OF BROWARD, INC.

Principal Place of Business

~~221A NE 67TH SUITE 1125~~
~~FORT LAUDERDALE FL 33308~~

Mailing Address

~~2211 NE 67TH SUITE 1125~~
~~FORT LAUDERDALE FL 33308~~

2. Principal Place of Business

6209 West Commercial

Suite, Apt. #, etc.

Suite 7

City & State

Forthland Florida

Zip

33319

Country

Broward

3. Mailing Address

Same

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1122526

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

INATY, KATHERINE

2211 NE 67TH SUITE 1125

FORT LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

Name

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

6209 West Commercial Bld.

Suite 7

City

Fort Lauderdale

FL

Zip Code

33319

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

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 ☐ Delete
 NAME **PVTD**
 STREET ADDRESS **INATY, KATHERINE**
 CITY-ST-ZIP *2211 NE 67TH SUITE 1125 6209 W Commercial Bld #7*
FORT LAUDERDALE FL 33308 Tamarac FL 33319

TITLE ☐ Delete
 NAME **S**
 STREET ADDRESS **INATY, KATHERINE**
 CITY-ST-ZIP *6209 West Comm. Bld #7*
2211 NE 67TH SUITE 1125
FORT LAUDERDALE FL 33308 Tamarac FL 33319

TITLE ☐ Delete
 NAME **VP**
 STREET ADDRESS **Luis Escobar**
 CITY-ST-ZIP *6209 West Commercial Bld #7*
Tamarac, FL 33319

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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

4/29/02

Date

954-724-4141

Daytime Phone #

CR2E034 (9/01)