

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 27, 2001 8:00 am
Secretary of State

07-27-2001 90006 045 ***150.00

DOCUMENT # **P92000004754**

1. Entity Name

SARK, INC.

Principal Place of Business

Mailing Address

**7462 S.W. 166TH TERRACE
 MIAMI, FL 33157-3870**

80060806

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

11/16/92 #65-0460692

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DONNELLAN, J. J. III
 1900 BRICKELL AVENUE
 MIAMI FL 33129**

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

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, 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 **D** ☐ Delete
 NAME **KUNDE, GEORGE**
 STREET ADDRESS **7462 S.W. 166TH TERRACE**
 CITY-ST-ZIP **MIAMI, FL 33157-3870**

TITLE **PSTD** ☐ Delete
 NAME **SPRECHER, ROBERT**
 STREET ADDRESS **7462 S.W. 166TH TERRACE**
 CITY-ST-ZIP **MIAMI, FL 33157-3870**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/16/01

305-279-2298

Date

Daytime Phone #

CR2E034 (11/00)

JULY 14, 2001

2 of 2
attachment
B006080
pg2000W4754

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL 32314

ATTENTION MS. M. HODGES:

Thankyou for assisting me with reference to our 2001 UBR filing. I want to assure you, we did not receive the original notice in the mail. We researched our records to my avail. Out of sight out of mind, we failed to respond in a prompt manner as we have in the past.

Attached, you will find the Completed 2001 UBR with enclosed check for \$150-.

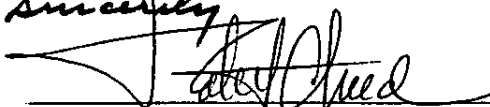
Sincerely,

Paul W Andrews,
Office Manager,
SARK, INC.

Dear MS. Hodges:

I have reviewed and approved this letter.
I too, thankyou for your assistance.

Sincerely,



ROBERT C. SPECHER, PRES., SARK, INC.