## 2000 UNIFORM BUSINESS REPORT (UBR) **FILED** OCUMENT # P9300064835 PAUL SEASHOLTZ & ASSOCIATES, INC. 03-07-2000 90089 033 \*\*\*150.00 Mailing Address Jigg Place of Business

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Name

1771 NW 17ST

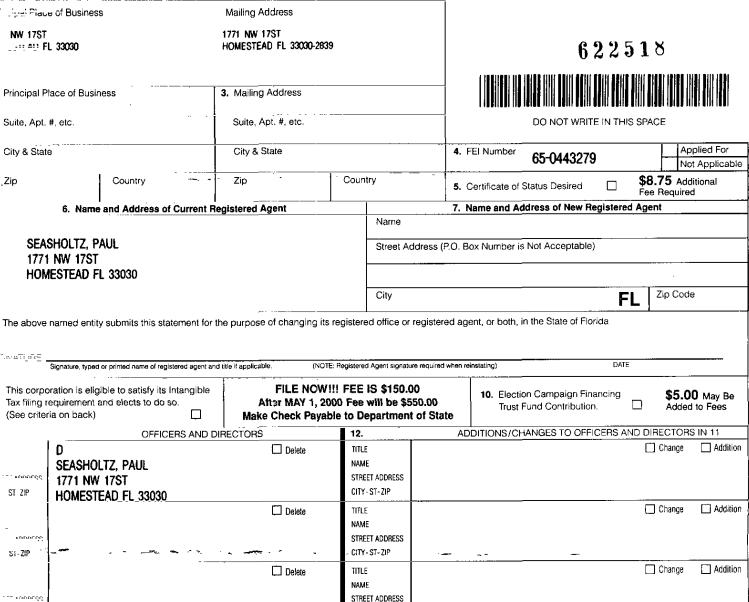
3. Mailing Address

City & State

Suite, Apt. #, etc.

HOMESTEAD FL 33030-2839

Mar 07, 2000 8:00 am Secretary of State



(See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ☐ Delete TITLE SEASHOLTZ, PAUL NAME STREET ADDRESS 1771 NW 17ST CITY-ST-ZIP HOMESTEAD FL 33030 Delete NAME KONNEGE STREET ADDRESS CITY-ST-ZIP SI-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP ST- ZIP ☐ Addition ☐ Defete TITLE NAME STREET ADDRESS ADDRESS CITY-ST-ZIP ST ZIP Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

**NW 17ST** 

\_\_-:: #!! FL 33030

Suite, Apt. #, etc.

City & State

en eti eta

.Zip

Principal Place of Business

SEASHOLTZ, PAUL

1771 NW 17ST HOMESTEAD FL 33030

Country

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

SEASHOLTZ

CR2E034 (9/99)