

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P93000064906

1. Entity Name

Miner's Hall For Hire, Inc.

Principal Place of Business

22040 Spring Mill Court
Estero, FL 33928

Mailing Address

22040 Spring Mill Court
Estero, FL 33928

2. Principal Place of Business

22040 Spring Mill Court

3. Mailing Address

22040 Spring Mill Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0437366

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Kaplan, Jonathan T.
22040 Spring Mill Court
Estero, FL 33928

7. Name and Address of New Registered Agent

Name

Wanderon, Thomas

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

9915 Tamiami Trail North, Suite 2

City Naples

FL

Zip Code 34108

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 Thomas Wanderon

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

(NOTE: Registered Agent signature required when reinstating.)

12/28/2000

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, 2000 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 DP
NAME Kaplan, Jonathan T.
STREET ADDRESS 22040 Spring Mill Court
CITY-ST-ZIP Estero, FL 33928

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

900003583099-2
-01/29/01--01005--001
****750.00 ****750.00

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

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CITY-ST-ZIP

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☐ 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)(f), 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:

Jonathan T. Kaplan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jonathan T. Kaplan

12/28/2000

Date

941-992-7430

Daytime Phone #

CR2E034 (9/99)

REINSTATEMENT

2000

[Signature]