

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P93000081469****1. Entity Name Rolling Stones Land Development, Inc.****FILED**
May 13, 2000 8:00 am
Secretary of State

05-13-2000 90010 018 ***150.00

Principal Place of Business

Mailing Address

B0091833**2. Principal Place of Business****3. Mailing Address****1473 N.W. 129th Terrace****1473 N.W. 129th Terrace**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Sunrise, FLCity & State
Sunrise, FL**4. FEI Number**
65-0450834

Applied For

Not Applicable

Zip
33323

Country

33323

Country

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required****6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent**Name
David Torchin, C.P.A.Street Address (Post Office Box Number is Not Acceptable)
6211 West Broward Blvd.

Suite 200

City
Plantation**FL**Zip Code
33324**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

David Torchin, C.P.A.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/25/00**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****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Marlon S Young 1473 N.W. 129th Terrace Sunrise, FL 33323 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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

Marlon Scott Young
President

Date

Daytime Phone #

4/29/00 (954) 394-6615

CR2E034 (9/99)