

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000082635

1. Entity Name

POWER PLUS PROPERTIES, INC.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90032 043 ***150.00

Principal Place of Business

Mailing Address

5400 S. DIXIE HWY.
 WEST PALM BEACH FL 33405

5400 S. DIXIE HWY.
 WEST PALM BEACH FL 33405-3233



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

510 Bunker Rd
 Suite, Apt. #, etc.

510 Bunker Rd.
 Suite, Apt. #, etc.

City & State

City & State

West Palm Bch, FL

West Palm Beach, FL

Zip 33405

Country US

Zip 33405

Country US

4. FEI Number

65-0454575

Applied For

Not Applicable

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

SCHMITT, WILLIAM P
 5400 S. DIXIE HWY.
 WEST PALM BEACH FL 33405

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, 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

TITLE D
 NAME SCHMITT, WILLIAM P
 STREET ADDRESS 5400 S. DIXIE HWY.
 CITY-ST-ZIP WEST PALM BEACH FL 33405 ☐ Delete

TITLE
 NAME 510 Bunker Rd
 STREET ADDRESS W. P Bch, FL 33405 ☒ Change ☐ Addition

TITLE S
 NAME SCHMITT, SAUNDRA
 STREET ADDRESS 5400 S. DIXIE HWY.
 CITY-ST-ZIP WEST PALM BEACH FL 33405 ☐ Delete

TITLE
 NAME 510 Bunker Rd
 STREET ADDRESS W. P. Bch FL 33405 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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

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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)(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 empowers.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/25/00 586-7088

CR2E034 (9/99)