

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90024 022 ***150.00

DOCUMENT # P94000021977

1. Entity Name

EREV, INC.

Principal Place of Business

Mailing Address

**1858 RINGLING BLVD.
SARASOTA FL 34236**

**1858 RINGLING BLVD.
SARASOTA FL 34236-5917**

2. Principal Place of Business

2100 S. TAMiami TRAIL

3. Mailing Address

2100 S. TAMiami TRAIL

Suite, Apt. #, etc.

SUITE 200

Suite, Apt. #, etc.

SUITE 200

City & State

SARASOTA, FL

City & State

SARASOTA, FL

Zip

34239

Country

USA

Zip

34239

Country

USA

4. FEI Number

65-0485568

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GLINDINNING, RENE M
1858 RINGLING BLVD
SARASOTA FL 34236**

7. Name and Address of New Registered Agent

Name

MARGARET SHOAF

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

2100 S. TAMiami TRAIL, #200

City

SARASOTA

FL

Zip Code

34239

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

Margaret Shoaf

MARGARET SHOAF, CPA

02-02-00

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

TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	SCHWARZE, ERHARD	
STREET ADDRESS	1858 RINGLING BLVD	
CITY-ST-ZIP	SARASOTA FL	
TITLE	DVP	<input checked="" type="checkbox"/> Delete
NAME	SCHWARZE, EVA	
STREET ADDRESS	1858 RINGLING BLVD	
CITY-ST-ZIP	SARASOTA FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	JAGER, MATTHIAS	
STREET ADDRESS	1858 RINGLING BLVD	
CITY-ST-ZIP	SARASOTA FL	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	GLENDINNING, RENE A	
STREET ADDRESS	1858 RINGLING BLVD	
CITY-ST-ZIP	SARASOTA FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V.P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAGER, MATTHIAS	
STREET ADDRESS	2100 S. TAMiami TRAIL, #200	
CITY-ST-ZIP	SARASOTA, FL 34239	
TITLE	T, P, S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARGARET SHOAF	
STREET ADDRESS	2100 S. TAMiami TRAIL, #200	
CITY-ST-ZIP	SARASOTA, FL 34239	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Margaret Shoaf

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-08-00

Date

941-366-5200

Daytime Phone #

CR2E034 (9/99)