

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000031663

1. Entity Name

DEB & DAVE, INC.

FILED

May 15, 2000 8:00 am
Secretary of State

05-15-2000 90262 015 ***150.00

Principal Place of Business

Mailing Address

16308 WILLOW STREAM LN
NORTH FT MYERS FL 33917

16308 WILLOW STREAM LN
NORTH FT MYERS FL 33917-3309

2. Principal Place of Business

2013 SW 15th AVE

3. Mailing Address

2013 SW 15th AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CAPE CORAL FI

City & State

CAPE CORAL FI

4. FEI Number

65-0496385

Applied For

Not Applicable

Zip

33991

Country

USA

Zip

33991

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BROOKS, DAVID W
16308 WILLOW STREAM LN
NORTH FT MYERS FL 33917

7. Name and Address of New Registered Agent

Name DAVID W. BROOKS

Street Address (P.O. Box Number is Not Acceptable)
2013 S.W. 15th AVE

City CAPE CORAL

FL

Zip Code 33991

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

TITLE D
NAME BROOKS, DAVID W
STREET ADDRESS 16308 WILLOW STREAM LN
CITY-ST-ZIP NORTH FT MYERS FL 33917 ☐ Delete

TITLE D
NAME BROOKS, DEBRA K
STREET ADDRESS 16308 WILLOW STREAM LN
CITY-ST-ZIP NORTH FT MYERS FL 33917 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 2013 SW 15th AVE.
CITY-ST-ZIP CAPE CORAL, FI 33991 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 2013 SW 15th AVE
CITY-ST-ZIP CAPE CORAL, FI 33991 ☒ Change ☐ Addition

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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)(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:

David W. Brooks

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/00

Date

941 242-0098

Daytime Phone #

CR2F034 (9/99)