

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000070110

1. Entity Name

MACKENZIE EQUITIES LIMITED, INC.

FILED

May 19, 2000 8:00 am
Secretary of State

05-19-2000 90018 028 ***158.75

Principal Place of Business

Mailing Address

9900 STIRLING ROAD
SUITE 231
COOPER CITY FL 33024
US

DIANE WACKS
P.O. BOX 16837
PLANTATION FL 33318-6837
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0524319

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

WACKS, DIANE

DAVID KRUZEL

8181 WEST BROWARD BLVD., SUITE 350
PLANTATION FL 33324

Name

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

8181 West Broward Blvd - 350

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

(NOTE: Registered Agent signature required when reinstating)

4/28/2000
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **ST** ☐ Delete
NAME **WACKS, MAURICE**
STREET ADDRESS **8710 LAKE DASHA TERRACE**
CITY-ST-ZIP **PLANTATION FL 33324**

TITLE **V** ☒ Delete
NAME **LIPSICK, DAVID**
STREET ADDRESS **8710 LAKE DASHA TERRACE**
CITY-ST-ZIP **PLANTATION FL 33324**

TITLE **P** ☒ Delete
NAME **WACKS, DIANE**
STREET ADDRESS **8710 LAKE DASHA TERRACE**
CITY-ST-ZIP **PLANTATION FL 33324**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

TITLE ☒ Change ☒ Addition
NAME **P Edward Wacks**
STREET ADDRESS **8181 West Broward Blvd 350**
CITY-ST-ZIP **Plantation, FL 33324**

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

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

TITLE ☐ Change ☐ 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:

Edward A. Wacks
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/2000 473-6550
Date Daytime Phone #

CR2E034 (9/99)