## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Jan 28, 2000 8:00 am Secretary of State DOCUMENT # **P9400073972** 1. Entity Name THE 523 CORPORATION 01-28-2000 90075 026 \*\*\*158.75 Principal Place of Business Mailing Address 111-2-ND-AVE\_N.E. ITTZ NO AVE N.E. SUITE 505 > SHITE 505 ST. PETERSBURG FL 33701-3479 ST. PETERSBURG FL 33701 Principal Place of Business DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3271424 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent UPINA-EARL & EARL Street Address ATT: ANDREW MEYER 111 2ND AVE N.E. , SUITE 1404 ST. PETERSBURG FL 33701 City 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. DITE ☐ Delete TITLE OLSTER, MADELEINE B 734 PINELLAS BAYWAY OLSTER, MADELEINE B NAME NAME STREET ADDRESS STREET ADDRESS 111 2 ND AVE N.E. CITY-ST-ZIP CITY-ST-ZIP ST: PETERSBURG-FL 33701 **CEOS** Addition TITLE ☐ Delete TITLE OLSTER BRUCE 734 PINELLAS OLSTER, BRUCE NAME NAME STREET ADDRESS 111-2-ND AVE N.E: > STREET ADDRESS CITY-ST-ZIP ST: PETERSBURG FL 33701 CITY - ST - 7IP ☐ Addition . . Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE DDE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 trystee 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 a SIGNATURE: Date Daytime Phone #