

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000079147

1. Entity Name

CANAL BOATS, INC.

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90162 027 ***150.00

| | |
|---|--|
| Principal Place of Business 315 SE 7TH ST SUITE 301 FT LAUDERDALE FL 33301 | Mailing Address 315 SE 7TH ST SUITE 301 FT LAUDERDALE FL 33301-3158 |
|---|--|

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|--|--|
| 2. Principal Place of Business 651 Seabreeze Blvd. Suite, Apt. #, etc. | 3. Mailing Address 651 Seabreeze Blvd. Suite, Apt. #, etc. |
|--|--|

| | |
|------------------------------------|------------------------------------|
| City & State Ft. Lauderdale, FL | City & State Ft. Lauderdale, FL |
| Zip 33316 | Zip 33316 |
| Country USA | Country USA |

| | |
|---|--------------------------------|
| 4. FEI Number 65-0531339 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LATONA, JOHN ESQ
315 SE 7TH ST
SUITE 301
FT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

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 _____ (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 NAME STREET ADDRESS CITY-ST-ZIP | D BEKOFF, ROBERT 315 SE 7TH ST SUITE 301 FT LAUDERDALE FL 33301 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D, P BEKOFF, Robert 651 Seabreeze Blvd. Ft. Lauderdale, FL 33316 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D LATONA, JOHN 315 SE 7TH ST SUITE 301 FT. LAUDERDALE FL 33301 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | S BEKOFF, Dorothy 651 Seabreeze Blvd. Ft. Lauderdale, FL 33316 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> 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: Robert Bekoff 4/6/00 (954) 467-0008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)