

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000089999

1. Entity Name

CONCEPT ADVISORS, INC.

FILED

Feb 07, 2000 8:00 am
Secretary of State

02-07-2000 90058 024 ***150.00

Principal Place of Business

Mailing Address

1007 NORTH FEDERAL HIGHWAY
SUITE S
FT. LAUDERDALE FL 33304

1007 NORTH FEDERAL HIGHWAY
SUITE S
FT. LAUDERDALE FL 33304-1422

2. Principal Place of Business

1859 N. Pine Island Road

Suite, Apt. #, etc.

Suite 161

City & State

Plantation, FL 33322

Zip

33322

Country

Broward

3. Mailing Address

1859 N. Pine Island Road

Suite, Apt. #, etc.

Suite 161

City & State

Plantation, FL 33322

Zip

33322

Country

Broward



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0558549

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

ARTHUR, RICHARD J
1007 NORTH FEDERAL HIGHWAY
SUITE S
FT. LAUDERDALE FL 33304

Name

Richard J. Arthur

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

1859 N. Pine Island Road

Suite 161

City

Plantation

FL

Zip Code

33322

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

Richard J. Arthur

Richard J. Arthur

February 2, 2000

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	ARTHUR, RICHARD J	
STREET ADDRESS	9261 W. SUNRISE BOULEVARD	
CITY-ST-ZIP	PLANTATION FL 33322	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
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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 an other like empowered.

SIGNATURE:

Richard J. Arthur

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb. 2, 2000

Date

(954) 474-3474

Daytime Phone #

CR2E034 (9/99)