## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Aug 08, 2000 8:00 am Secretary of State DOCUMENT # P95000047846 ST. GEORGE WAREHOUSE OF FLORIDA, INC. 08-08-2000 90091 007 \*\*\*558.75 Principal Place of Business Mailing Address 10255 N.W. 116TH WAY 10255 N.W. 116TH WAY MEDDLEY FL 33178 MEDDLEY FL 33178 00077294 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0587437 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DEBORAH LUCAS OTTEN, JOHN Street Address (P.O. Box Number is Not Acceptable) #2201 10955 S.W. 15 ST APT #111 PEMBROKE PINES FL 33025 MIAMI 33178 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. FILE NOW!!! FEE IS \$550.00 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 SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ■ Addition Change □ Detete TITLE FORTUNATO, ANTHONY M NAME NAME STREET ADDRESS 30 VERRAZANO DRIVE STREET ADDRESS CITY-ST-ZIP MIDDLETOWN NJ CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE CRUET, JORGE L NAME NAME 2480 SWEET RAIN WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **CORONA CA 91719** CITY-ST-ZIP ☐ Change -- F Addition TITLE Delete TITLE DILLARD, WILLIAM A NAME NAME STREET ADDRESS STREET ADDRESS 1015 SULLIVAN RD CITY-ST-ZIP CITY+ST-ZIP ATLANTA GA 30349 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Delete TITLE Change Addition TITLE

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

JORGE: IL CRUET EV PEFINANCE

AUGUST 3, 2000

(310) 764~4395

Daytime Phone #

CR2E034 (5/00