

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000061554

1. Entity Name

NICHE ENTERPRISES, INC.

**FILED**  
**Mar 20, 2000 8:00 am**  
**Secretary of State**

03-20-2000 90029 012 \*\*\*150.00

Principal Place of Business

Mailing Address

76 HOLLY CIRCLE  
TEQUESTA FL 33469

POST OFFICE BOX 32342  
PALM BEACH GARDENS FL 33420-2342

2. Principal Place of Business

3021 Jasmine Terrace

3. Mailing Address

Suite, Apt. #, etc.

City & State

Delray Beach, Florida

City & State

Zip

33483

Country

USA

Zip

Country

4. FEI Number

65-0601187

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

MCAHREN, KEVIN  
76 HOLLY CIRCLE  
TEQUESTA FL 33469

7. Name and Address of New Registered Agent

Name

Kevin McAhren

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

3021 Jasmine Terrace

City

Delray Beach

FL

Zip Code

33483

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

*Kevin McAhren* Kevin McAhren, President

3-Mar-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

TITLE PSTD  
NAME MCAHREN, KEVIN B  
STREET ADDRESS 76 HOLLY CIRCLE  
CITY-ST-ZIP TEQUESTA FL 33469 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD  
NAME Kevin McAhren  
STREET ADDRESS 3021 Jasmine Terrace  
CITY-ST-ZIP Delray Beach, Florida 33483 ☒ Change ☐ Addition

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

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

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

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

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

*Kevin McAhren* Kevin McAhren, President

3-Mar-2000 561-279-2252

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)