

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000073528

1. Entity Name

BOCA HANDWRITING EXPERTS, INC.

FILED
Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90166 024 ***150.00

Principal Place of Business

7040 WEST PALMETTO PARK RD.
SUITE 2-505
BOCA RATON FL 33433

Mailing Address

7040 WEST PALMETTO PARK RD.
SUITE 2-505
BOCA RATON FL 33433-3407

2. Principal Place of Business

22473 ENSENADA Way
Suite, Apt. #, etc.

3. Mailing Address

22473 ENSENADA Way
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Boca Raton, FL

City & State

Boca Raton, FL

4. FEI Number 65-0621547

Applied For

Not Applicable

Zip

Country

33433

USA

Zip

Country

33433

USA

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

JOHNSON, DALLAS G
22473 ENSENADA WAY
BOCA RATON FL 33433

Name Dallas G. Johnson

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

22473 ENSENADA Way

City Boca Raton

FL

Zip Code

33433

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

Dallas G. Johnson
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/5/2000
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
NAME JOHNSON, DALLAS G
STREET ADDRESS 22473 ENSENADA WAY
CITY-ST-ZIP BOCA RATON FL 33433 ☐ Delete

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

TITLE D
NAME JOHNSON, SANDRA
STREET ADDRESS 22473 ENSENADA WAY
CITY-ST-ZIP BOCA RATON FL 33433 ☐ Delete

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

TITLE ☐ Delete
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CITY-ST-ZIP

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TITLE ☐ Change ☐ 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 all other like empowered.

SIGNATURE: *Dallas G. Johnson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/2000
Date

(561) 487-3309
Daytime Phone #

CR2E034 (9/99)