

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000086034

1. Entity Name

TREASURE CORNER ANTIQUES & DESIGN, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90411 015 ***150.00

Principal Place of Business

Mailing Address

580 NW 12TH AVE
 POMPANO BEACH FL 33069

580 NW 12TH AVE
 POMPANO BEACH FL 33069-2010

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0627078

Applied For

Not Applicable

Zip

Country

Zip

Country

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

KRUGER, MARY ANN
 580 NW 12TH AVENUE
 POMPANO BEACH FL 33069

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

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 DP ☐ Delete
 NAME KRUGER, HEINZ A
 STREET ADDRESS 580 NW 12TH AVE
 CITY-ST-ZIP POMPANO BEACH FL 33069

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

TITLE DST ☐ Delete
 NAME KRUGER, MARY A.
 STREET ADDRESS 580 NW 12TH AVE
 CITY-ST-ZIP POMPANO BEACH FL

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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:

Mary Ann Kruger
 MARY ANN KRUGER, REGISTERED

April 20, 2000 954/946-3339

Date

Daytime Phone #

CR2E034 (9/99)