

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000093235

1. Entity Name

AMEN INVESTMENT CLUB INC.

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90130 035 ***150.00

Principal Place of Business

Mailing Address

2380 NW 3RD STREET
POMPANO BEACH FL 33069

P O BOX 1342
POMPANO BEACH FL 33061-1342
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0655197

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

BLACKMAN, VERONICA
719 N. POWERLINE ROAD
POMPANO BCH FL 33069

Name

Blackman, Veronica

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

890 N.W. 23rd Terrace

City

Pompano

FL

Zip Code

33069

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

Veronica Blackman, Secretary

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/20/00

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

T ☐ Delete
NAME WINSTON, GAYLE
STREET ADDRESS 6261 SW 18 STREET
CITY-ST-ZIP POMPANO BCH FL 33068

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

P ☐ Delete
NAME LEVLORN, GILES
STREET ADDRESS 2751 NW 18TH TERRACE
CITY-ST-ZIP FT LAUDERDALE FL

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

S ☐ Delete
NAME BLACKMAN, VERONICA
STREET ADDRESS 719 N. POWERLINE ROAD
CITY-ST-ZIP POMPANO BCH FL 33068

☐ Change ☐ Addition
TITLE
NAME *Blackman, Veronica*
STREET ADDRESS *890 N.W. 23 Terr*
CITY-ST-ZIP *Pompano Bch 71 33069*

☐ Delete
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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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:

Veronica Blackman, Veronica Blackman *4/20/00* *954-968-1013*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)