2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9600004028 1. Entity Name PREMIER TEAM, INC.						FILED Jan 21, 2000 8:00 am Secretary of State 01-21-2000 90057 003 ***150.00				
Principal Place	e of Business	Mailing Address					01 21 2000 3	.0057 005	150.	
3007 MANATEE AVE., WEST BRADENTON FL 34205		3007 MANATEE AVE., WEST BRADENTON FL 34205-4240								
2. Principal Place of Business 515 36 St St W		3. Mailing Address 575 34 5+ W Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
Suite, Apt. #, etc. 5+e. E		Ste E			ĺ		DO NOT WHIT	EIN THIS SP.	ACE	
City & State		City & State			4.	. FEI Numi	^{Der} 65-063965 5	 5		plied For t Applicable
Zip Country		Zip Country				Costificat	e of Status Desired	<u>\$</u>	8.75 Add	
34205		34502	US	4				□ Ė∈	e Required	
	6. Name and Address of Current F	legistered Agent		Name -	<u> 7,</u>	Name an	d Address of New R	egistered Ag	ent	
FORBES, DANIEL V 3007 MANATEE AVE., WEST BRADENTON FL 34205					Street Address (P.O. Box Number is Not Acceptable) 7 S 36 S W S E					
				City	1 1 .			FL	Zip Code	3, 5
9 The shave	named entity submits this statement for	the ourses of changing its	register	I G N	of en for	agent or b	oth, in the State of Flo		342	ری
SIGNATURE _	Daniel V. Jales Signature, typed or printed name of registered agent ar	/		d Agent signatur				1/13/01	<u> </u>	
0 This		FILE NOW!								
 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)		After MAY 1, 200 Make Check Payab	00 Fee	will be \$55	50.00		lection Campaign Fin rust Fund Contribution		\$5.00 Added	May Be to Fees
11.	OFFICERS AND D		12.		A	ADDITIONS	CHANGES TO OFFI			
NAME STREET ADDRESS CITY-ST-ZIP	D FORBES, DANIEL V 3007 MANATEE AVE., WEST BRADENTON FL 34205	☐ Delete	4				Ste E 51 34205		₫] Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AVERY, MARIE R 3007 MANATEE AVE WEST BRADENTON FL 34205	☐ Delete		F	C15 364	~ Stw	5te 6 F1 34205	[L Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete			~~				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete							☐ Change	☐ Addition :
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						[Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete		•				[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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR							1 / 13 00 Date		/1-746~ time Phone #	0505