

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90143 026 ***150.00

DOCUMENT # P96000009670

1. Entity Name

MR. POCKETBOOK, INC.

Principal Place of Business

Mailing Address

1004 N.W. 38TH AVENUE
 LAUDERHILL FL 33311

1004 N.W. 38TH AVENUE
 LAUDERHILL FL 33311-4119

2. Principal Place of Business

3. Mailing Address

2850 NW 5th AVE

2850 NW 5th AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

MIAMI, FL.

MIAMI FL.

City & State

City & State

Zip

33127

Country

MIAMI DADE

Zip

33127

Country

MIAMI DADE



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0635190

Applied For

Not Applicable

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

Name

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

2850 NW 5th AVE

MIAMI

City

FL

Zip Code

33127

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

Phillip Nahum

D

DATE

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

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

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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 PVSD ☐ Delete
 NAME NAHUM, PHILLIP
 STREET ADDRESS 1004 NW 38TH AVE
 CITY-ST-ZIP LAUDERHILL FL 33311

2850 NW 5th AVE
 MIAMI, FL 33127

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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TITLE ☐ Change ☐ Addition

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ 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

Phillip Nahum

D

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 19/99