

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2000 8:00 am
Secretary of State
 02-14-2000 90028 044 ***150.00

DOCUMENT # P96000014665

FLORIDA ENERGY AUDITORS, INC.

A0021957



DO NOT WRITE IN THIS SPACE

Principal Place of Business **Mailing Address**
 HIATUS RD 10695 LAKE OAK WAY
 FL 33351 BOCA RATON FL 33498-1510

Principal Place of Business **3. Mailing Address**

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **City & State**

Zip **Country** **Zip** **Country**

4. FEI Number **65-0647824** **Applied For**
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DUBROW DUKER & ASSOCIATES, P.A.
2840 UNIVERSITY DRIVE
CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** **Zip Code**

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**

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
☐ Delete	PD WIENER, BARRY 10695 LAKE OAK WAY BOCA RATON FL VPS	☐ Change ☐ Addition	
☐ Delete	JULIAN, DONNA 11837 NW 32ND N CORAL SPRINGS FL 33065	☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ 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, typed or printed name of signing officer or director**

Date **Daytime Phone #**

CR2E034 (9/99)