

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000045753

1. Entity Name

SILICONE GRAPHICS & DESIGN, INC.

**FILED**  
**Apr 07, 2000 8:00 am**  
**Secretary of State**

04-07-2000 90019 014 \*\*\*150.00

Principal Place of Business

Mailing Address

8636 MIRAMAR BLVD  
MIRAMAR FL 33025

8636 MIRAMAR BLVD  
MIRAMAR FL 33025-2006

2. Principal Place of Business

100 E Linton Blvd

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

139A

City & State  
Delray Bch.

City & State

Zip  
33483

County  
Palm Bch

Zip

Country

4. FEI Number

65-0673738

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

DRUMMOND, COURTNEY  
8636 MIRAMAR BLVD  
MIRAMAR FL 33025

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
WELCH, RICHARD  
8680 SW 212 ST APT 207  
MIAMI FL ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
WELCH, TAMMY  
8680 SW 212 ST APT 207  
MIAMI FL ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MORRIS, DEAN  
8636 MIRAMAR BLVD  
MIRAMAR FL 33025 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MORRIS, PHYLLIS  
8636 MIRAMAR BLVD  
MIRAMAR FL 33025 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
DRUMMOND, COURTNEY  
5773 PEBBLE BROOK LANE  
BOYNTON BEACH FL 33437 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
DRUMMOND, KRISTEN  
5773 PEBBLE BROOK LANE  
BOYNTON BEACH FL 33437 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ 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

4/3/2000 561-2431127  
Date Daytime Phone #

CR2E034 (9/99)