

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000049628

1. Entity Name

SEA SIDE SERVICES, INC.

FILED
Feb 14, 2000 8:00 am
Secretary of State

02-14-2000 90170 019 ***150.00

Principal Place of Business

Mailing Address

1971 W LUMSDEN ROAD #105
BRANDON FL 33511

1971 W LUMSDEN ROAD #105
BRANDON FL 33511-8820

00019132



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1463 SW 18TH AVE

3. Mailing Address

1463 SW 18TH AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

FT. LAUDERDALE FL.

City & State

FT. LAUDERDALE FL.

4. FEI Number

59-3417029

Applied For

Not Applicable

Zip

33312

Country

USA

Zip

33312

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FRISCHERTZ, SCOTT M
6860 SUNRISE COURT
CORAL GABLES FL 33133

7. Name and Address of New Registered Agent

Name

FRISCHERTZ, SCOTT M

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

1463 SW 18TH AVE.

City

FT. LAUDERDALE

FL

Zip Code

33312

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

TITLE P ☐ Delete

NAME FRISCHERTZ, SCOTT M
STREET ADDRESS 6860 SUNRISE CT
CITY-ST-ZIP CORAL GABLES FL 33133

TITLE ST ☐ Delete

NAME FRISCHERTZ, HILARY B
STREET ADDRESS 6860 SUNRISE CT
CITY-ST-ZIP CORAL GABLES FL 33133

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition

NAME
STREET ADDRESS 1463 SW. 18TH AVE.
CITY-ST-ZIP FT. LAUDERDALE FL. 33312

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS 1463 SW. 18TH AVE.
CITY-ST-ZIP FT. LAUDERDALE FL. 33312

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/00
Date

Daytime Phone #