

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000054291

1. Entity Name

PARTY PLANNING CONNECTION, INC.

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

04-14-2000 90117 001 ***150.00

Principal Place of Business

Mailing Address

1322 BRAEBURN
LAUDERDALE FL 33068

1322 BRAEBURN
NORTH LAUDERDALE FL 33411-8536

2. Principal Place of Business

12726 56 PL North

3. Mailing Address

12726 56 PL North

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

West Palm Beach, Florida

City & State

West Palm Beach, Florida

4. FEI Number

65-0675817

Applied For

Not Applicable

Zip

33411

Country

Palm Beach

Zip

33411

Country

Palm Beach

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

HOPKINS, MARISA
1322 BRAEBURN
NORTH LAUDERDALE FL 33068

Name

Hopkins, Marisa

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

12726 56 PL North

City

West Palm Beach

FL

Zip Code

33411

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

Marisa Hopkins / owner

4/4/00

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 P
NAME HOPKINS, MARISA
STREET ADDRESS 1322 BRAEBURN
CITY-ST-ZIP NORTH LAUDERDALE FL 33068

TITLE
NAME
STREET ADDRESS 12726 56 PL North
CITY-ST-ZIP West Palm Beach, FL 33411

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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:

Marisa Hopkins

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/8/00

Daytime Phone #

561-333-7444

CR2E034 (9/99)