

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000067601

1. Entity Name
OSBORN & ROBERT, INC.

APPROVED
AND
FILED

07/21/2000 90152 020 ****150.00

00 AUG 18 PM 12:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
301 Clematis St

3. Mailing Address
301 Clematis St

Suite, Apt. #, etc.
STE. 3000

Suite, Apt. #, etc.
STE. 3000

City & State
West Palm Beach FL

City & State
WPB, FL

4. FEI Number 65-0690310

Applied For
Not Applicable

Zip Country
33401 USA

Zip Country
33401 USA

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

6. Name and Address of Current Registered Agent

REGALBUTO, JASON
160 SEABREEZE AVENUE
PALM BEACH FL 33480

7. Name and Address of New Registered Agent

Name
Wilder Regalbuto
Street Address (P.O. Box Number is Not Acceptable)
301 Clematis St. Ste 3000
City & State
West Palm Beach FL 33401

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
Wilder Regalbuto

7.17.00

Signature, typed or printed name of registered agent and 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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	D	<input type="checkbox"/> Delete
NAME	REGALBUTO, JASON R	
STREET ADDRESS	160 SEABREEZE AVENUE	
CITY-ST-ZIP	PALM BEACH FL 33480	
TITLE	D	<input type="checkbox"/> Delete
NAME	REGALBUTO, WILDER B	
STREET ADDRESS	160 SEABREEZE AVENUE	
CITY-ST-ZIP	PALM BEACH FL 33480	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
NAME		
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: Wilder Regalbuto

7.17.00 561-655-1724

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

OSBORN & ROBERT

MAKERS

TEL: 561-655-1724
800-655-1423
FAX: 561-655-1799

17 July 2000

Dear Sirs,

As I did not receive any First Notice, enclosed please find the \$150.00 due. I was told on the phone today to put into writing that I did not receive any first notice therefore was not to be held accountable for any late fees.

Please contact me if you have any questions, otherwise I will assume this matter is taken care of.

Thank you,

Wilder Regalbuto -- owner Osborn & Robert

*Letter sent w/ payment & form.