

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000073768

1. Entity Name
ULTRA PRO REALTY & INVESTMENTS, INC.

FILED
Aug 29, 2000 8:00 am
Secretary of State

08-29-2000 90188 020 ***150.00

Principal Place of Business

4801 S UNIVERSITY DRIVE
SUITE #3100
FT LAUDERDALE FL 33328
US

Mailing Address

4801 S UNIVERSITY DRIVE
SUITE #3100
FT LAUDERDALE FL 33328
US

2. Principal Place of Business

3156 S UNIVERSITY DR
Suite, Apt. #, etc.
3156 S UNIVERSITY DR

3. Mailing Address

Suite, Apt. #, etc.

City & State

MIRAMAR FL

Zip

33025

Country

BROWARD

City & State

FL

Zip

33025

Country

BROWARD



DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

JOHNSON, SANDRA
3600 S STATE ROAD 7
SUITE 208
MIRAMAR FL 33023

7. Name and Address of New Registered Agent

Name SANDRA JOHNSON

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

3156 S UNIVERSITY DR

City MIRAMAR FL Zip Code 33025

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 \$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

TITLE DPTS
NAME JOHNSON, SANDRA
STREET ADDRESS 3600 S STATE ROAD 7 S-208
CITY-ST-ZIP MIRAMAR FL 33023 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE president
NAME SANDRA JOHNSON
STREET ADDRESS 3156 S UNIVERSITY DR, MIRAMAR
CITY-ST-ZIP FL 33025 ☒ Change ☐ Addition

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

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

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

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

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)