

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90741 001 ***300.00

DOCUMENT # **P 96000075296**
 1. Entity Name
STRATEGIC BUSINESS SERVICES, INC.

Principal Place of Business Mailing Address
3111 N. UNIVERSITY DR
Suite 718
CORAL SPRINGS, FL. 33065 **Same**

16050

2. Principal Place of Business 3. Mailing Address
3111 N. UNIVERSITY DR **Same**
 Suite Apt. #, etc. Suite, Apt. #, etc.
718

DO NOT WRITE IN THIS SPACE

City & State City & State 4. FEI Number Applied For
CORAL SPRINGS **FL** **65-0786020** Not Applicable
 Zip Country Zip Country 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
33065 USA

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
Jeffrey L. SCHULTZ
1025 NW 119 AVE
CORAL SPRINGS, FL. 33071
 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
 Signature, typed or printed name of registered agent and title if applicable.

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	TITLE	NAME	STREET ADDRESS CITY-ST-ZIP
	SCHULTZ, Jeffrey Pres.	1025 NW 119 AVE CORAL SPRINGS, FL. 33071	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
	Singer, Harold, Vice Pres.	3544 S. OCEAN DR BOCA RATON, FL. 33489	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
	SCHULTZ, Kathy Sec. Treas.	1025 NW 119 AVE CORAL SPRINGS, FL. 33071	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
			<input type="checkbox"/> Change <input type="checkbox"/> 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: **Jeffrey L. Schultze** **President** **5/9/2000** **954 757-1972**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)