## **2000 UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # **P96000075396**

1. Entity Name

## CASH'S ENTERPRISES INCORPORATED



08-15-2000 90007 005 \*\*\*158.75 Principal Place of Business Mailing Address 1420 OCEAN WAY 1420 OCEAN WAY nau14918 17-B JUPITER FL 33477 JUPITER FL 33477 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0592997 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CASH, JIMMY Street Address (P.O. Box Number is Not Acceptable) 1420 OCEAN WAY 17-B JUPITER FL 33477 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution Added to Fees (See criteria on back) 门 Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. (2/00) □ Delete Change Addition TITLE TITLE CASH, JIMMY NAME NAME 300 N.AIA 0-402 1420-OCEAN WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUPITER FL 33477 ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Defete ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP 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 employered 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug 15, 2000 8:00 am Secretary of State

attachment Docth.

081406

Cash's Enterprises Inc. P.O.Box 17266 West Palm Bch.,Fl.33416

175600A

August 11, 2000

In reply to: Corporate Filing

To: Whom it may concern.
UNIFORM BUSINESS REPORT
Division of Corporations
P.O.Box 1500
Tallahassee, Fl. 32302-1500

To: Whom it may concern.:

We received a filing form report from you on July 8<sup>th</sup> 2000 showing we were late on our filing for 2000. I was out of town when this arrived, but it was brought to my attention upon my arrival. My accountant Mr. Grant and myself have gone over all of our mail, corporate records and taxes back until Oct 1999. We can't find any record of receiving the form or any other notice.

We are sending a check for one hundred and fifty dollars hoping you might check your records again on mailing and pardon us this once. Thanks

Sincerely,

JIMMY CASH President

Cash's Enterprises Inc.