

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2000 8:00 am
Secretary of State

02-08-2000 90048 021 ***150.00

DOCUMENT # P96000075994

1. Entity Name

STACEY INVESTMENT, INC.

Principal Place of Business

Mailing Address

**31608 U.S. HIGHWAY 19 NORTH
 PALM HARBOR FL 34684**

**162 OLD SURREY LANE
 RICHMOND HILL ON L4C7E
 US**

B0016480



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3412702**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

**LONG, DENNIS R
 31608 U.S. HIGHWAY 19 NORTH
 PALM HARBOR FL 34684**

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

[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 \$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 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
 NAME **MORCOS, BOUTROS**
 STREET ADDRESS **162 OLD SURREY LANE**
 CITY-ST-ZIP **RICHMOND HILL, ONTARIO L4C- 7E5**

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

TITLE **VP** ☐ Delete
 NAME **BABCOCK, DAVE**
 STREET ADDRESS **11 SIMS CRESCENT UNIT 2**
 CITY-ST-ZIP **RICHMOND HILL ON**

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

TITLE **T** ☐ Delete
 NAME **KHREICH, GUSSAN**
 STREET ADDRESS **100 OBSERVATORY LN #1514**
 CITY-ST-ZIP **RICHMOND HILL ON L4C- 1T4**

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

TITLE **D** ☐ Delete
 NAME **BABCOCK, THERESA**
 STREET ADDRESS **11 SIMS CRESCENT UNIT 2**
 CITY-ST-ZIP **RICHMOND HILL ON**

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

TITLE **D** ☐ Delete
 NAME **MORCOS, SOUAD**
 STREET ADDRESS **162 OLD SURREY LANE**
 CITY-ST-ZIP **RICHMOND HILL ON L4C- 7E5**

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

TITLE **D** ☐ Delete
 NAME **KHREICH, ANTOINETTE**
 STREET ADDRESS **100 OBSERVATORY LN #1514**
 CITY-ST-ZIP **RICHMOND HILL ON L4C- 1T4**

TITLE ☐ Change ☐ *
 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 18, 00

905 886-1

Date

Daytime Phone #