

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000080858

1. Entity Name

TERRY SEITZ DESIGNS LIMITED, INC.

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

07-19-2000 90016 037 ***558.75

Principal Place of Business

6204 KEY LARGO LANE
PVT HSE
BOYNTA BEACH FL 33437
US

Mailing Address

6204 KEY LARGO LANE
PVT HSE
BOYNTON BEACH FL 33437
US

CORRECT

CORRECT

2. Principal Place of Business

6204 Key LARGO LANE

3. Mailing Address

6204 Key LARGO LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Pvt HSE

Pvt HSE

City & State

Boynton Bch FL

City & State

Boynton Bch FL

Zip

33437

Country

USA

Zip

33437

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

74-2845971

Applied For

Not Applicable

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

PERLOW, JEFFREY M

C/O JEFFREY M. PERLOW & ASSOCIATES, P.A.

1820 E. HALLANDALE BEACH BOULEVARD

HALLANDALE FL 33009

CORRECT

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PT ☐ Delete
NAME SEITZ, THELMA
STREET ADDRESS 6204 KEY LARGO LANE
CITY-ST-ZIP BOYNTON BEACH FL

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

TITLE VS ☐ Delete
NAME MARCUS, SONDR
STREET ADDRESS 7844 ROCKFORD ROAD
CITY-ST-ZIP BOYNTON BEACH FL 33437

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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:

Thelma Seitz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/13/00
Date

581-737-0057
Daytime Phone #