

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

1. Entity Name

CORTEZ PARASAIL, INC.

P96000084479

FILED
00 AUG 24 AM 9:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

12507 - 44th Ave. W.
BRADENTON, FL. 34209

Mailing Address

812 - 59th St. N.W.
BRADENTON, FL. 34209

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT

4. FEI Number

65-0700082

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOBBY BEATTY
PO BOX 581
CORTEZ, FL. 34215

7. Name and Address of New Registered Agent

Name
JOSEPH F. BERNHARD
Street Address (P.O. Box Number is Not Acceptable)
812 - 59th St. N.W.
City
BRADENTON FL Zip Code
34209

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

04-25-00

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
PRESIDENT JOSEPH F. BERNHARD 812 - 59th St. N.W. Bradenton, FL 34209	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Vice-President Deborah E. Bernhard 812 - 59th St. N.W. Bradenton, FL. 34209	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Secretary-Treasurer Betty J. Bernhard 812 - 59th St. N.W. Bradenton, FL. 34209	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
300003379899--3 -09/01/00--01028--010 ****908.75 ****908.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JOSEPH F. BERNHARD, PRESIDENT

04-25-00

941-795-1987

CR20034 (9/99)

KE