

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000089411

1. Entity Name
LASTER & ASSOCIATES, INC.

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90327 030 ***150.00

Principal Place of Business

8971 NW 3RD COURT
CORAL SPRINGS FL 33071

Mailing Address

8971 NW 3RD COURT
CORAL SPRINGS FL 33071

2. Principal Place of Business

9409 NW 73rd Ct

Suite, Apt. #, etc.

3. Mailing Address

9409 NW 73rd Ct

Suite, Apt. #, etc.

City & State

Tamara, Florida

City & State

Tamara, Florida

Zip

33321

Country

U.S.A.

Zip

33321

Country

U.S.A.

4. FEI Number

65-0704060

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

LASTER, BRUCE
8971 NW 3RD COURT
CORAL SPRINGS FL 33071

Name

Lastest, Bruce

Street Address (P.O. Box Number is Not Acceptable)

9409 NW 73rd Ct

City

Tamara

FL

Zip Code

33321

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 \$150.00
After MAY 1, 2001 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 **D** ☐ Delete
 NAME **LASTER, BRUCE**
 STREET ADDRESS **8971 NW 3RD COURT**
 CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE **D** ☒ Change ☐ Addition
 NAME **LASTER, BRUCE**
 STREET ADDRESS **9409 NW 73RD COURT**
 CITY-ST-ZIP **TAMARAC, FL 33321**

TITLE **VP** ☐ Delete
 NAME **LASTER, SUE F**
 STREET ADDRESS **8971 NW 3RD COURT**
 CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE **VP** ☒ Change ☐ Addition
 NAME **LASTER, SUE F**
 STREET ADDRESS **9409 NW 73RD COURT**
 CITY-ST-ZIP **TAMARAC, FL 33321**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 ☐ Delete
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 CITY-ST-ZIP

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:

Bruce Laster **Bruce Laster** **4/23/01** **154-726-5997**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)