

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000002062

1. Entity Name

UH-OH ACQUISITIONS, INC.

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90066 016 ***150.00

Principal Place of Business

517 S.W. FIRST AVENUE
FORT LAUDERDALE FL 33301

Mailing Address

517 S.W. FIRST AVENUE
FORT LAUDERDALE FL 33301-2803

2. Principal Place of Business

1800 N. Dixie Hwy.

Suite, Apt. #, etc.

3. Mailing Address

1800 N. Dixie Hwy.

Suite, Apt. #, etc.

City & State

Hollywood, Florida

City & State

Hollywood, Florida

Zip

33020

Country

USA

Zip

33020

Country

USA

4. FEI Number

65-0720954

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MEE, GLENN R
517 S.W. FIRST AVENUE
FORT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name

Peter A. Rose, Esq.

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

Rose & Rose, P.A.

2101 N. Andrews Ave., Suite 200

City

Ft. Lauderdale,

FL

Zip Code
33311

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, 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 **P** ☒ Delete
NAME **SPERLING, BENJIE**
STREET ADDRESS **517 S.W. FIRST AVENUE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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STREET ADDRESS
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President/Secy/Director** ☒ Change ☐ Addition
NAME **Wayne Morris**
STREET ADDRESS **1800 N. Dixie Hwy.**
CITY-ST-ZIP **Hollywood, FL 33020**

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

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

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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:

Wayne Morris Wayne Morris

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)