

2000 UNIFORM BUSINESS REPORT (UBR)

10/2

DOCUMENT # P97000002378

1. Entity Name

ENVIRO GLADES INC.

FILED

00 JUN 28 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

248 C ROAD
LOXAHATCHEE FL 33470

P O BOX 476
LOXAHATCHEE FL 33470-0476
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3426513

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

PARRISH, BRUCE W JR.
105 SO. NARCISSUS AVE., SUITE 701
WEST PALM BEACH FL 33401

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|---|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GOLTZENE, THOMAS R 248 C ROAD LOXAHATCHEE FL 33470 | <input type="checkbox"/> Delete |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | 800003314148-4 -07/06/00-01004-009 ****150.00 ****150.00 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | LS | <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

S.Y. FRIEDMAN CEO/VP

4-26-00

561-798-4895

Date

Home Phone

CR2E034 (9/99)

2062

EnviroGlades, Inc.

P.O. Box 476
Loxahatchee, Florida 33471

Phone: (561) 798-4995
Fax : (561) 793-6708

June 19, 2000

Divisions of Corporations
Uniform business report filings
P.O. Box 6327
Tallahassee, Florida 32314
Attn: Leslie Sellers

Attachment
P97000002378

Dear Ms. Sellers,

Per our conversation of last week, I am forwarding to you copies of our filings (6) that have been obviously lost, with new checks.

You stated that you would accept these as being filed before May 1, 2000.

Thank you for your cooperation,

S.M. Friedman
Chief Financial Officer