

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name P97000007582
Polyfluro, Inc.

FILED
May 10 2000 8:00 am
Secretary of State

Principal Place of Business Mailing Address
46 Somerset Terrace 46 Somerset Terrace
Palm Beach Gardens, FL 33418 Palm Beach Gardens, FL 33418

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc. 909 Pinnacle Drive

Suite, Apt. #, etc. 909 Pinnacle Drive

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip Fort Collins, CO
80525 USA

Zip Fort Collins, CO
80525 USA

65-0723809

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

Steven Friedman
24 Bermuda Lake Drive
Palm Beach Gardens, Florida 33418

Name

Steven Samiljan

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

City

2135 S. Congress Avenue, Suite 300
West Palm Beach FL 33406

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

Steven Samiljan

(NOTE: Registered Agent signature required when reconstituting)

DATE

5-8-00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	S	Friedman, Steven	<input checked="" type="checkbox"/> Delete
NAME		24 Bermuda Lake Drive	
STREET ADDRESS		Palm Beach Gardens, FL 33418	
CITY-ST-ZIP			
TITLE	VP	Friedman, Irving Z.	<input checked="" type="checkbox"/> Delete
NAME		101 Banyan Isle Drive	
STREET ADDRESS		Palm Beach Gardens, FL 33418	
CITY-ST-ZIP			
TITLE	P	Sayre, Robert A.	<input checked="" type="checkbox"/> Delete
NAME		46 Somerset Terrace	
STREET ADDRESS		Palm Beach Gardens, FL 33418	
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	P/S	Blair Turner	
STREET ADDRESS		909 Pinnacle Drive	
CITY-ST-ZIP		Fort Collins, CO 80525	
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		500003274015--6	
STREET ADDRESS		-06/01/00--01076--014	
CITY-ST-ZIP		****367.50 ****61.25	
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> 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:

Blair Turner

Blair Turner

5/9/00

(970) 223-1184

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number

CR2E034 (9/99)

AD