

APPLICATION

FOR

2000-UBR



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

00 OCT 16 AM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000009495

1. Corporation Name

E.F. 5, INC.

Principal Place of Business

6023 26TH STREET WEST
BRADENTON FL 34207

Mailing Address

6023 26TH STREET WEST
BRADENTON FL 34207

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/27/1997

5. FEI Number

65-0721725

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	FRIDENBERG, EDMUND	6023 26TH STREET WEST	BRADENTON FL 34207
D	FRIDENBERG, ELIZABETH	6023 26TH STREET WEST	BRADENTON FL 34207

800003459468--1
11/09/00--01105--006
****150.00 ****150.00

8. Name and Address of Current Registered Agent

FRIDENBERG, EDMUND
6023 26TH STREET WEST
BRADENTON FL 34207

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

10/12/00

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Edmund Fridenberg

Date

10/12/00

Daytime Phone #

941-753-2343



MAIL BOXES ETC.®

6023 26th Street West
Bradenton, FL 34207
(941) 753-2343
(941) 753-2882 FAX

October 12, 2000

Florida Department of State
PO Box 6327
Tallahassee, FL 32314

Re: Uniform Business Report
#P97000009495 E.F. 5, Inc.

Dear Sirs:

Enclosed please find the \$150.00 renewal fee for 2000.

Please be advised, we did not receive the uniform business report in January or July. Per your office we are enclosing the renewal application and fee.

If we do not receive the 2001 report form in January, we will contact you.

Thank you for your understanding in this matter.

Sincerely,

Elizabeth Fridenberg
E.F. 5, Inc.
(941) 753-2343