## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **P97000012200**

1. Entity Name

RIGGS ENTRY FEATURES, INC.

## FILED Jan 26, 2000 8:00 am Secretary of State

01-26-2000 90186 026 \*\*\*150.00

Zip Country Zip Country 5. (  6. Name and Address of Current Registered Agent 7. Name -	- F0015075
STE 108         STE 108           JACKSONVILLE FL 32257         JACKSONVILLE FL 32257-6284           2. Principal Place of Business         3. Mailing Address           Suite, Apt. #, etc.         Suite, Apt. #, etc.           10%         (0%)           City & State         City & State           Zip         Country           5. (0           6. Name and Address of Current Registered Agent         7. Name	
Suite, Apt. #, etc.   Suite, Apt. #, etc.   (0 %)   City & State   City & State   4. F   Zip   Country   Zip   Country   5. (0 %)   6. Name and Address of Current Registered Agent   7. Name   -	
City & State Country Zip Country 5. Country 5. Country 7. Name	i indiimat iin ikiti ihdii basit ootit ontit kotot ifoto tibin tibit datti ooti fabt
City & State City & State 4. F  Zip Country Zip Country 5. (  6. Name and Address of Current Registered Agent 7. N  Name -	DO NOT WRITE IN THIS SPACE
6. Name and Address of Current Registered Agent 7. Name	El Number 59-3426857   Applied For Not Applied For
_ Name _	Certificate of Status Desired S8.75 Additional Fee Required
	lame and Address of New Registered Agent
AATOMIA ORGOODU P	المنافية
2955 HARTLEY ROAD, SUITE 106A	ox Number is Not Acceptable)
STE 108 JACKSONVILLE FL 32257	
City	FL Zip Code
8. The above named entity submits this statement for the purpose of changing its registered office or registered ago	ent, 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 re	instating) 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 \$5.00 May Br Trust Fund Contribution. Added to Fees
	L DITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE  NAME  RIGGS, DENNIS  STREET ADDRESS  CITY-ST-ZIP  Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  JACKSONVILLE FL 32257  Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP	☐ Change ☐ ↑"
TITLE  NAME  Gregory E. Matowina  STREET ADDRESS  CITY-ST-ZIP  Tacks any ille, FL 32257  Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP	☐ Change ☐ * * * *****
TITLE Delete TITLE	☐ Change ☐ *!!"
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP	☐ Change ☐ '"
TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	☐ Change ☐ ^"
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section	☐ Change ☐ • • • • • • • • • • • • • • • • • •

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 directs 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 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

13100

8660-666-406

Daytime Phone #