

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2000 8:00 am
Secretary of State
 03-20-2000 90085 033 ***150.00

DOCUMENT # P97000013262

1. Entity Name

O'HARA'S INVESTMENT GROUP, INC.

Principal Place of Business

% THE LIST COMPANIES
 138 N. COUNTY ROAD
 PALM BEACH FL 33480

Mailing Address

% THE LIST COMPANIES
 138 N. COUNTY ROAD
 PALM BEACH FL 33480-3917

2. Principal Place of Business

223 Sunset Ave

3. Mailing Address

223 Sunset Ave

Suite, Apt. #, etc.

Suite 110

Suite, Apt. #, etc.

Suite 110

City & State

Palm Beach FL

City & State

Palm Beach FL

Zip

33480

Country

Zip

33480

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0730014

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

LIST, MARTIN A
 138 N. COUNTY ROAD
 PALM BEACH FL 33480

7. Name and Address of New Registered Agent

Name

Martin A. List

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

223 Sunset Ave, Suite 110

City

FL

Zip Code

33480

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)

3/14/00
 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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 LIST, MARTIN A
 2211 EMBASSY DRIVE
 W PALM BEACH FL 33401

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 MILLER, ALAN H
 1 LAKE TRAIL CIRCLE
 PALM BEACH FL 33480

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE
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 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ 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

3/14/00 (561)655-7150
 Date Daytime Phone #

CR2E034 (9/99)