

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000013598

1. Entity Name
G.I.O. INVESTMENTS, INC.

R

FILED
Aug 10, 2000 8:00 am
Secretary of State

08-10-2000 90005 026 ***150.00

Principal Place of Business

1201 SOUTH OCEAN DRIVE
UNIT 1905N
HOLLYWOOD FL 33019

Mailing Address

1201 SOUTH OCEAN DRIVE
UNIT 1905N
HOLLYWOOD FL 33019

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0809514

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

SINGER, LEONARD I
1530 NORTH FEDERAL HIGHWAY
LAKE WORTH FL 33460

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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
DPST
KAGAN, SPENCER M
1201 S OCEAN DR, UNIT 1905N
HOLLYWOOD FL 33019 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

7/25/00

Date

1-781-767-3811
1-781-631-6633

Daytime Phone #

CR2E034 (5/00)

Attachment # P97 000013598
DU077828
Bolles & Jacobs Tax Service, Inc.

289 UNION STREET
HOLBROOK, MASSACHUSETTS 02343
TEL. 781-767-3811 • FAX 781-767-0409

August 2, 2000

Division of Corporations
P O Box 6327
Tallahassee, FL 32314

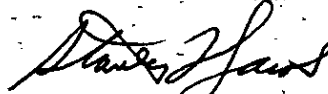
Gentlemen:

As per my telephone conversation with the Florida Department of State on July 29, 2000, my client, G.I.O. Investments, Inc., never received their original Form 2000.

Enclosed please find the second request form along with a check for \$150.00.

Thank you for your cooperation.

Very truly yours,



Stanley L. Jacobs, CPA

SLJ:fmd
Enclosures