

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000013944

1. Entity Name

FUTURFLY, INC.

FILED
Jan 31, 2000 8:00 am
Secretary of State

01-31-2000 90018 022 ***158.75

Principal Place of Business

Mailing Address

~~4700 N STATE RD 7, SUITE 221~~
~~FT LAUDERDALE FL 33319~~

~~4700 N STATE RD 7, SUITE 221~~
~~FT LAUDERDALE FL 33319-5804~~

2. Principal Place of Business

720 North East 38th St.

3. Mailing Address

720 North East 38th St.

Suite, Apt. #, etc.

N/A

Suite, Apt. #, etc.

N/A

City & State

Ft. Lauderdale, FL 33334

City & State

Ft. Lauderdale, FL 33334

Zip

Country

Zip

Country

4. FEI Number

65-0730369

Applied For

Not Applicable

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

BURNSIDE, JAMES A III

~~4700 N STATE RD 7, SUITE 221~~

~~FT LAUDERDALE FL 33319~~

Name

BURNSIDE, JAMES A., III

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

720 N. E. 38th Street

City

Ft. Lauderdale

FL

Zip Code

33334-293

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 *James A. Burnside, III* James A. Burnside, III, President

Jan. 26, 2000

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 \$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	D	<input type="checkbox"/> Delete
NAME	BURNSIDE, JAMES A III	
STREET ADDRESS	720 NE 38 ST	
CITY-ST-ZIP	OAKLAND PARK FL 33334	
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"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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
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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: *James A. Burnside, III* James A. Burnside, III, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jan. 26, 2000