

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000017256

1. Entity Name

HAMILTON'S 205 WEST VENICE AVE. CORPORATION

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90093 019 ***150.00

Principal Place of Business

Mailing Address

~~7275 BEE RIDGE RD~~
~~SARASOTA FL 34241~~

~~7275 BEE RIDGE RD~~
~~SARASOTA FL 34232-6254~~

2. Principal Place of Business

3. Mailing Address

2201 Centu Ct
Suite, Apt. #, etc.
Ste #118

2201 Centu Ct
Suite, Apt. #, etc.
Ste 118

City & State
Sarasota FL

City & State
Sarasota FL

Zip
34232

Country

Zip
34232

Country

4. FEI Number 65-0733131

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

HAMILTON, JANA
7275 BEE RIDGE RD
SARASOTA FL 34241

Name

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

2201 Centu Ct #118

City

Sarasota

FL

Zip Code

34232

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HAMILTON, MICHAEL
7275 BEE RIDGE RD
SARASOTA FL 34241 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
2201 Centu Ct #118
Sarasota, FL 34232 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HAMILTON, JANA
7275 BEE RIDGE RD
SARASOTA FL 34241 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
2201 Centu Ct #118
SARASOTA, FL 34232 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
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☐ Delete

TITLE
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- - ☐ Change - ☐ Addition

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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

Date

Daytime Phone #

JANA HAMILTON, Pres.

4/17/00

(941) 378-7000