

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000020087

1. Entity Name

SOUTH BEACH INSTALLATIONS, INC.

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90143 043 ***150.00

Principal Place of Business

Mailing Address

6405 OLD MEDINAH CIR.
LAKE WORTH FL 33463

6405 OLD MEDINAH CIR.
LAKE WORTH FL 33463-7337

2. Principal Place of Business

3. Mailing Address

820 N. 8TH STREET

(SAME AS ABOVE)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 2

City & State

City & State

LAKE WORTH, FL

Zip

Country

Zip

Country

4. FEI Number 65-0743177

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

SERIO, STEPHANIE S
6405 OLD MEDINAH CIR.
LAKE WORTH FL 33463

Name: ARTHUR F. SERIO III

Street Address (P.O. Box Number is Not Acceptable)
6405 OLD MEDINAH CIRCLE

City LAKE WORTH

FL

Zip Code 33463

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

01/10/2000

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	PD SERIO III, ARTHUR F 6405 OLD MEDINAH CIR. LAKE WORTH FL 33463	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPD SERIO, STEPHANIE S 6405 OLD MEDINAH CIR. LAKE WORTH FL 33463	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SERIO, JENNIFER A 3304 VIRGINIA STREET #4C COCONUT GROVE FL 33133	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SERIO, ELIZABETH A 6405 OLD MEDINAH CIRCLE LAKE WORTH FL 33463	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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

01/10/2000 (561)588-8100

Date

Daytime Phone #

CR2E034 (9/99)