

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000020737

1. Entity Name

DANIEL STEERE, INC.

FILED

Jan 26, 2000 8:00 am  
Secretary of State

01-26-2000 90114 025 \*\*\*150.00

Principal Place of Business

122 N. MILITARY TR  
E  
WEST PALM BEACH FL 33415  
US

Mailing Address

624 10TH AVE N  
LAKE WORTH FL 33460-2206  
US

2. Principal Place of Business

1490 S. MILITARY TR.

3. Mailing Address

Suite, Apt. #, etc.

City & State

West Palm Bch

City & State

4. FEI Number 65-0613775

Applied For

Not Applied For

Zip

33415

Country

US

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STEERE, DANIEL  
624 10TH AVENUE N.  
LAKE WORTH FL 33460

7. Name and Address of New Registered Agent

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

1/18/00

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  
EO  
STEERE, DANIEL A  
624 10TH AVENUE NORTH  
LAKE WORTH FL 33460 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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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 employees.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/18/00