

2000 UNIFORM BUSINESS REPORT (UBR)

10-9-00

DOCUMENT # P97000035236

1. Entity Name

Shoppers World, Inc

FILED

00 JUN -9 AM 9:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
00063477

Principal Place of Business

Mailing Address

2655 NORTH OCEAN DRIVE, SUITE 300
SINGER ISLAND, FL 33404

2. Principal Place of Business

2655 NORTH OCEAN DR

3. Mailing Address

2655 NORTH OCEAN DR

Suite, Apt. #, etc.

SUITE 300

Suite, Apt. #, etc.

SUITE 300

City & State

SINGER ISLAND

City & State

SINGER ISLAND

Zip

33404

Country

Palm Beach

Zip

FL

Country

Palm Beach

DO NOT WRITE IN THIS SPACE

10/9/00 90218/022 \$150.00

4. FEI Number

65-0747761

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Seymour Kaplan
1224 S. Dixie Hwy.
West Palm Beach, FL 33460-5610

7. Name and Address of New Registered Agent

Name
Richard F. Hill

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

2655 NORTH OCEAN DRIVE

SUITE 300

City SINGER ISLAND

FL

Zip Code
33404

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

Richard F. Hill

Richard F. Hill

5/30/00

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 NAME STREET ADDRESS CITY-ST-ZIP	Kaplan, Seymour 1224 S. Dixie Hwy Lake Worth, FL 33460 5610	<input checked="" 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"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Richard F. Hill 2655 N. Ocean Drive, Suite 300 Singer Island, FL 33404	<input checked="" 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
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

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:

Richard F. Hill
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PROS Richard F. Hill

5/30/00

521-863

Date

Daytime Phone #

CR2E034 (9/99)

6/16