## **2000 UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # P97000037560 SECRETARY OF STATE DIVISION OF CORPORATIONS SAUNDERS BROTHERS, INC. 00 JUN - 1 PH 2: 14 Principal Place of Business Mailing Address 200 CHARLEY AVENUE APT. #1 200 CHARLEY AVENUE APT. #1 FORT LAUDERDALE FL 33315 FORT LAUDERDALE FL 33312-7155 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0761755 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired X Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name · Saunders. William L Street Address (P.O. Box Number is Not Acceptable) 200 CHARLEY AVENUE APT. #1 FORT LAUDERDALE FL 33315 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE Change Addition ☐ Delete SAUNDERS, WILLLIAM L NAME NAME 200003291412 200 CHARLEY AVENUE APT #1 STREET ADDRESS STREET ADDRESS -06/15/00--01072--001 CITY-ST-ZIP FORT LAUDERDALE FL 33315 CITY-ST-ZIP TITLE ☐ Delete TITLE SAUNDERS, STEPHEN NAME NAME 150 WEST AVENUE #114 STREET ADDRESS STREET ADDRESS CITY-ST-7IP WOODSTOWN NJ 08098 CITY-ST-ZIP ☐ Defete TITLE Change Addition . NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

If hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. If 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 DIRECT

Date

Daytime Phone #

Member: American Institute of Certified Public Accountants

New Jersey Society of Certified Public Accountants

May 31, 2000

Mr. Buck Kohr
Division of Corporation
409 E. Gaines Street
Tallahassee, FL. 32399

RE: Saunders Brothers Inc. FEI# 65-0761755

Dear Mr. Kohr:

You will find enclosed a replacement 2000 Uniform Business Report plus a check in the amount of \$ 158.75 for the above referenced client. Please be advised that the original return was already filed but it appears to have been lost in the mail.

We have also included a Fed-Ex return envelope so that you can forward Saunders Brothers Inc.'s corporation clearance. If you require any additional information, do not hesitate to contact me.

Sincerely,

Robert L Best, CPA