

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000047496

1. Entity Name

FENWOOD KITCHENS AND BATH, INC.

**FILED**  
**May 19, 2000 8:00 am**  
**Secretary of State**

05-19-2000 90100 018 \*\*\*150.00

Principal Place of Business

Mailing Address

431 N.E. 28TH STREET  
POMPANO BEACH FL 33064

431 N.E. 28TH STREET  
POMPANO BEACH FL 33064-3109

2. Principal Place of Business

3001 NW 4 TERR

3. Mailing Address

3001 NW 4 TERR

Suite, Apt. #, etc.

#167

Suite, Apt. #, etc.

#167

City & State

POMPANO BEACH, FL

City & State

POMPANO BEACH, FL

Zip

33064

Country

BROWARD

Zip

33064

Country

BROWARD



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0764694

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BOHMAN, KEVIN  
431 N.E. 28TH STREET  
POMPANO BEACH FL 33064

7. Name and Address of New Registered Agent

Name

MARK PONGRATZ

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

3001 NW 4 TERR #167

City

POMPANO BEACH

FL

Zip Code

33064

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

X 3-23-2000

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

TITLE P ☒ Delete  
NAME KEVIN BOHMAN  
STREET ADDRESS 431 NE 28TH ST  
CITY-ST-ZIP POMPANO BCH FL 33064

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Change ☒ Addition  
NAME MARK PONGRATZ  
STREET ADDRESS 3001 NW 4 TERR #167  
CITY-ST-ZIP POMPANO BEACH, FL 33064

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 #

X 3-23-2000

CR2E034 (9/99)