2001 UNIFORM BUSINESS REPORT (UBR)

Apr 30, 2001 8:00 am Secretary of State DOCUMENT # P9700064461 DANA & BARBARA CORP. 04-30-2001 90365 009 ***150.00 Principal Place of Business Mailing Address 1637 S MILITARY TRL 8802 SE SANDCASTLE CIR W PALM BCH FL 33415 HOBE SOUND FL 33455 2. Principal Place of Business Suite, Apt. #, etc. Suite. Apt. #, etc DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For 65-0769534 Not Applicable Country Zip **\$8.75** Additional USA 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BUCKLES, BARBARA Street Address (P.O. Box Number is Not Acceptable) 8802 SE SANDCASTLE CIR. HOBE SOUND FL 33455 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. egistored Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Delete TITLE TITLE Change ina Stole Lucoski NAME NAME **BUCKLES, BARBARA** 968 Fitch Drive STREET ADDRESS STREET ADDRESS 8802 SE SANDCASTLE CIR. CITY-ST-ZIP west Palm Beach, R 33415 CITY-ST-7IP **HOBE SOUND FL 33455** Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TIT1 F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.