

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000067252

1. Entity Name  
HENLEAZE, INC.

**FILED**  
**Sep 12, 2000 8:00 am**  
**Secretary of State**

09-12-2000 90017 050 \*\*\*150.00

Principal Place of Business

860 NO NOVA RD  
HOLLY HILL PLAZA  
DAYTONA BEACH FL

Mailing Address

860 NO NOVA RD  
HOLLY HILL PLAZA  
DAYTONA BEACH FL

2. Principal Place of Business

ABOVE ADDRESS

3. Mailing Address

ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3461258**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TOUNG, BRIAN R  
619 N GRANDVIEW AVE  
DAYTONA BEACH FL 32118

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

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|  |   |                                 |  |  |   |
|--|---|---------------------------------|--|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PSD<br>PARKER, LESLIE<br>1377 ARBOL GRANDE CIRCLE<br>DAYTONA BEACH FL 32119 | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VTD<br>PARKER, MARY<br>1377 ARBOL GRANDE CIRCLE<br>DAYTONA BEACH FL 32119   | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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 empowered.

SIGNATURE:

*MARY PARKER*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/6/00

(904) 253 6007

Date

Daytime Phone #

CR2E034 (5/00)

Attachment # P9700000 1252  
B0106001

9/6/00

860<sup>N</sup> NOVA RD.  
HOLLY HILL PLAZA  
DAYTONA BEACH,  
FL 32117

FEI # 59-3461258

Dear Sir

This is to let you know  
we did not receive the First Uniform Business  
report, to our knowledge. so therefore the fee  
was not paid. I have tried to trace back  
through our checks, but have not been able to  
find it.

Unfortunately, and quite frequently  
we do have problems with our letters not being  
delivered, and being returned to sender.  
Whether this is the explanation for our having  
not received your notice, I cannot be sure.  
but if we had received same I would certainly  
have paid it.

Thanking you for your patients and  
understanding

Yours sincerely  
Harry Parker