

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P970000680-79

1. Entity Name **ROLLER HOCKEY INTERNATIONAL, INC.**

FILED
SECRETARY OF STATE
CORPORATIONS

00 NOV 17 PM 12:40

Principal Place of Business
**2681 WALNUT AVENUE
TUSTIN, CA 92780**

Mailing Address
**2681 WALNUT AVENUE
TUSTIN, CA 92780**

2. Principal Place of Business
304 1/2 RUBY AVENUE
Suite, Apt. #, etc.

3. Mailing Address
304 1/2 RUBY AVENUE
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
BALBOA ISLAND, CA

Zip
92662

Country
ORANGE

City & State
BALBOA ISLAND, CA

Zip
92662

Country
ORANGE

4. FEI Number
33-0490839

Applied For
☐ Not Applicable

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

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
Tallahassee FL 32301**

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

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

C
MONTAGUE, BOB
2681 WALNUT AVENUE
TUSTIN, CA 92780

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

C, P, T, M
FRED DREW
304 1/2 RUBY AVENUE
BALBOA ISLAND CA 92662

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

V, S, M
DAVE CAIRNS
304 1/2 RUBY AVENUE
BALBOA ISLAND CA 92662

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

700003492607-4
-12/11/00-01005-005
*******61.25 *****61.25**

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

AD

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **FRED DREW, Chairman**

11-15-00 714-902-6371

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (5/00)