

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000071908

1. Entity Name

MAXIMO MARINA, INC.

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90865 026 ***150.00

Principal Place of Business

3701 50TH AVE S
ACCT OFFICE
ST PETERSBURG FL 33711
US

Mailing Address

3701 50TH AVE S
ACCT OFFICE
ST PETERSBURG FL 33711-4829
US

2. Principal Place of Business

3. Mailing Address

1500 2nd St South

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
St. Petersburg FL

4. FEI Number

59-3463662

Applied For

Not Applicable

Zip

Country

Zip

Country

33701

Pinellas

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

WEBER, MICHAEL R
3701 50TH AVE S
ST PETERSBURG FL 33711

Name

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

1409 N. Ft Harrison Ave
Unit A.

City

Clearwater

FL

Zip Code

33755

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

MR Weber michael R. Weber, Esq

4/26/00

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME AVIRAM, JIMMY
STREET ADDRESS 3701 50TH AVE S
CITY-ST-ZIP ST PETERSBURG FL 33711

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

TITLE TSD ☐ Delete
NAME WEBER, MICHAEL R
STREET ADDRESS 3701 50TH AVE S
CITY-ST-ZIP ST PETERSBURG FL 33711

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

TITLE VD ☐ Delete
NAME AVIRAM, TAL
STREET ADDRESS 3701 50TH AVE S
CITY-ST-ZIP ST PETERSBURG FL 33711

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

TITLE DC ☐ Delete
NAME WILLIAMS, ROBERT C
STREET ADDRESS 3701 50TH AVE S
CITY-ST-ZIP ST PETERSBURG FL 33711

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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:

MR Weber Secretary Michael Weber

Date

Daytime Phone #

CR2E034 (9/99)