

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000088549

1. Entity Name

YACHTS PLUS, INC.

FILED
Mar 10, 2000 8:00 am
Secretary of State

03-10-2000 90035 039 ***150.00

Principal Place of Business

Mailing Address

~~11825 ROYAL PALM BLVD~~
~~BLDG 8 #204~~
CORAL SPRINGS FL 33065
US

7274 NW 63 WAY
PARKLAND FL 33067-1464
US

2. Principal Place of Business

1401 SE 15th St #317

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ft Lauderdale FL

City & State

4. FEI Number

65-0792237

Applied For

Not Applicable

Zip

33316

Country

USA

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

DINUCCI, SEBASTIAN
11825 ROYAL PALM BLVD
BLDG 8 #204
CORAL SPRINGS FL 33065

Name

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

1401 SE 15th St 317

City

Ft Lauderdale

FL

Zip Code

33316

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

Sebastian J. Dinucci

3/1/00

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 ☐ Delete
NAME D
STREET ADDRESS DINUCCI, SEBASTIAN
CITY-ST-ZIP 10740 NW 21 PLACE
CORAL SPRINGS FL 33071

TITLE ☒ Change ☐ Addition
NAME 1401 SE 15th St #317
STREET ADDRESS Ft Lauderdale FL 33316
CITY-ST-ZIP

TITLE ☒ Delete
NAME DINUCCI, DEBORAH
STREET ADDRESS 10740 NW 21 PLACE
CITY-ST-ZIP CORAL SPRINGS FL 33071

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

Sebastian J. Dinucci
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/1/00 954 522 6100

CR2E034 (9/99)