- 2001 UNIFORM BUSINESS REPORT (UBR) May 23, 2001 8:00 am DOCUMENT # 797000091508 Secretary of State DAN-MAR ASSOCIATES, INC. 05-23-2001 91165 048 \*\*\*150 00 191 S. Riverside Dr Pompano Beach, Fl 33062 2. Principal Place of Business 3. Mailing Address same 791 S. Kiverside Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State Beach tompano Not App icable Country \$8.75 Additional 33262 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NANCY KNOECLER 197 S. Riverside Dr Stree<sup>-</sup> Address (P.O. Box Number is Not Acceptable) Pompano Beach, Fl 3302 Zip Code FL 8. The above ramed entity submits this statement for the purpose of changing its legistered office or registered agent, or both, in the State of Florida. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be -- After MAY-1, 20( 1 Fee: will be \$550.00 = Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payab a to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Addition KNOEller, NANCY 197 S. Riverside Dr ☐ Delete THE TITLE NAME NAME STREET ADDRESS STREET ADDRESS Pempano Black, FI 33062 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Addition Change ☐ Delete STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change TITLE ☐ Delete DAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIE Addition TITLE ☐ Defete ☐ Change DAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Delete TITLE ☐ Change ☐ Addition THE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for he 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 no 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 is a 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: Daytime Phone #

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# DAN-MAR ASSOCIATES, INC.

797 3. Riverside Dr. Pompario Beach, FI 33062 954-783-8733 771053

April 28, 2001

## **UNIFORM BUSINESS REPORT**

Division of Corporations P.O. Box 1500 Tallahassee, Fl. 32302-1500

RE: P97000091508 FEI #65-0837852

# TO WHOM IT MAY CONCERN:

Please be advised the attached Uniform Business Report reflects my new mailing address and replaces the following:

#### OLD PRINCIPAL PLACE OF BUSINESS

3340 E. Atlantic Blvd. Pompano Beach, Fl. 33062

### OLD MAILING ADDRESS

608 S. Riverside Dr. Pompano Beach, Fl 33062

Please adjust your records accordingly, so that next year I will receive my packet and be able to renew on-line. Thank you.

Sincerely,

Nancy Knoeller