

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000107296

1. Entity Name

SEIDLER RACING, INC.

FILED
May 12, 2000 8:00 am
Secretary of State

05-12-2000 90029 022 ***150.00

Principal Place of Business

3201 S.W. 15TH STREET
DEERFIELD BEACH FL 33442

Mailing Address

3201 S.W. 15TH STREET
DEERFIELD BEACH FL 33442-8157

2. Principal Place of Business

1450 BELLA DRIVE

Suite, Apt. #, etc.

3. Mailing Address

1450 BELLA DRIVE

Suite, Apt. #, etc.

City & State

BEVERLY HILLS, CA

Zip

90210

Country

City & State

BEVERLY HILLS, CA

Zip

90210

Country

4. FEI Number:

65-0836107

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PERLOW, JEFFREY M
1820 EAST HALLANDALE BEACH BLVD.
HALLANDALE FL 33009

7. Name and Address of New Registered Agent

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)

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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.

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**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SEIDLER, GARY 3201 S.W. 15TH STREET BEERFIELD BEACH FL 33442	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SEIDLER, LANA 3201 S.W. 15TH STREET DERFIELD BEACH FL 33442	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SEIDLER, GARY 1450 BELLA DRIVE BEVERLY HILLS, CA 90210	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SEIDLER, LANA 1450 BELLA DRIVE BEVERLY HILLS, CA 90210	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

SIGNATURE REQUIRED

GARY SEIDLER

Date

Daytime Phone #

4-28-00 310-246-1639

CR2E034 (9/99)