

# 2000 UNIFORM BUSINESS REPORT (UBR)

0080688

DOCUMENT # P97000109160

FILED

1. Entity Name

PBC ACQUISITION CORP.

00 MAR 20 PM 4: 37

Principal Place of Business

Mailing Address

751 PARK OF COMMERCE DR  
SUITE 108  
BOCA RATON FL 33487

751 PARK OF COMMERCE DR  
SUITE 108  
BOCA RATON FL 33487-3622

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2. Principal Place of Business

3. Mailing Address

640 E. OCEAN AVE

640 E. OCEAN AVE

Suite, Apt. #, etc.  
# 23

Suite, Apt. #, etc.  
# 23

City & State  
BOYNTON BEACH, FL

City & State  
BOYNTON BEACH, FL

Zip  
33435

Country  
U.S.A.

Zip  
33435

Country  
U.S.A.



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0804473

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PRYOR, THAD  
751 PARK OF COMMERCE DR  
BOCA RATON FL 33487

7. Name and Address of New Registered Agent

Name: JEFFREY LEVITT  
Street Address (P.O. Box Number is Not Acceptable): 640 E. OCEAN AVE #23  
City: BOYNTON BEACH FL Zip Code: 33435

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

*Jeffrey Levitt*

3/14/00

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
COB	WEISSMAN, MICHAEL	751 PARK OF COMMERCE DR	BOCA RATON FL 33487	<input checked="" type="checkbox"/>
PCOO	PRYOR, THAD	751 PARK OF COMMERCE DR	BOCA RATON FL 33487	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PRESIDENT-DIRECTOR	ROSS LEVITT	640 E. OCEAN AVE #23	BOYNTON BEACH, FL 33435	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SECRETARY-TREASURER	JEFFREY LEVITT	640 E. OCEAN AVE #23	BOYNTON BEACH, FL 33435	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

*Jeffrey Levitt*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEFFREY LEVITT

Date

Daytime Phone #

2047  
561-7378

CR2E034 (9/99)