

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000000095

1. Entity Name

PRODUCTIVITY@WORK INC.

FILED

May 13, 2000 8:00 am  
Secretary of State

05-13-2000 90012 039 \*\*\*158.75

Principal Place of Business

7300 W. CAMINO RD  
STE 216  
BOCA RATON FL 33433

Mailing Address

1355 W PALMETTO PARK RD. SUITE 269  
BOCA RATON FL 33486-3303

2. Principal Place of Business

5304 N.W. 120th Ave.

3. Mailing Address

5304 NW 120th Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Coral Springs, FL

City & State

Coral Springs, FL

Zip

33076

Country

Broward

Zip

33076

Country

Broward

4. FEI Number

65-0816148

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SCHWARTZ, MARK A  
1489 SW 9TH ST  
BOCA RATON FL 33486

7. Name and Address of New Registered Agent

Name

Schwartz, Mark A

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

5304 NW 120th Avenue

City

Coral Springs

FL

Zip Code

33076

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.

Mark A. Schwartz, President

(NOTE: Registered Agent signature required when reinstating)

04/10/00

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 P  
NAME SCHWARTZ, MARK A ☐ Delete  
STREET ADDRESS 1498 SW 9TH ST  
CITY-ST-ZIP BOCA RATON FL 33486

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☒ Change ☐ Addition  
NAME Schwartz, Mark, A.  
STREET ADDRESS 5304 NW 120th Ave.  
CITY-ST-ZIP Coral Springs, FL 33076

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

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

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark A. Schwartz 04/10/00 954-346-3939

Date

Daytime Phone #

CR2E034 (9/99)