

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000002676

1. Entity Name

SHINY DAYS, INC.

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90220 036 ***150.00

Principal Place of Business

2581 MAYFAIR LANE
WESTON FL 33327

Mailing Address

2581 MAYFAIR LANE
WESTON FL 33327-1506

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0823675

Applied For

Not Applicable

Zip

Country

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

DAVIS, ALAN J
780 TAMiami CANAL RD
MIAMI FL 33144

Name Alan J Davis

Street Address (P.O. Box Number is Not Acceptable)
2581 Mayfair Lane

City Weston

FL

Zip Code 33327

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

Alan J Davis

Alan J Davis

3-5-00

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 P ☐ Delete
NAME DAVIS, ALAN J
STREET ADDRESS 2581 MAYFAIR LANE
CITY-ST-ZIP WESTON FL 33327

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

TITLE D ☐ Delete
NAME SCHEINER, MONROE I
STREET ADDRESS 2731 PINEHURST
CITY-ST-ZIP WESTON FL 33332

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

TITLE D ☐ Delete
NAME DAVIS, BARBARA H
STREET ADDRESS 2581 MAYFAIR LANE
CITY-ST-ZIP WESTON FL 33327

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP WESTON FL 33332

TITLE D ☐ Delete
NAME SCHEINER, EVE G
STREET ADDRESS 2731 PINEHURST
CITY-ST-ZIP WESTON FL 33332

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP WESTON FL 33332

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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:

Alan J Davis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-5-00

Date

305.206.2566

Daytime Phone #

CR2E034 (9/99)