

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000003644

1. Entity Name

EDWARD J. DOMANICO & ASSOCIATES INC.

FILED
Feb 04, 2000 8:00 am
Secretary of State

02-04-2000 90017 009 ***158.75

Principal Place of Business

Mailing Address

2665 PALMER PLACE
WESTON FL 33332

2665 PALMER PLACE
WESTON FL 33332-1838

2. Principal Place of Business

3200 SOUTH ANDREWS AVE

3. Mailing Address

3200 S. ANDREWS AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 110

SUITE 110

City & State

City & State

FT. LAUDERDALE FL

FT. LAUDERDALE FL

Zip

Country

Zip

Country

33316

USA

33316

USA

6. Name and Address of Current Registered Agent

DOMANICO, EDWARD J
2665 PALMER DR.
WESTON FL 33332

7. Name and Address of New Registered Agent

Name

EDWARD J. DOMANICO

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

3200 S. ANDREWS AVE SUITE 110

City

FT. LAUDERDALE

FL

Zip Code

33316

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

Edward J. Domanico *Edward J. Domanico* 01/25/00

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	PST	<input checked="" type="checkbox"/> Delete
NAME	DOMANICO, EDWARD	
STREET ADDRESS	2665 PALMER PLACE	
CITY-ST-ZIP	WESTON FL 33332	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT/TREAS.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EDWARD J. DOMANICO	
STREET ADDRESS	3200 S. ANDREWS AVE SUITE 110	
CITY-ST-ZIP	FT. LAUDERDALE FL 33316	
TITLE	VICE PRESIDENT/SEC.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JUDITH P. DOYLE	
STREET ADDRESS	3200 S. ANDREWS AVE SUITE 110	
CITY-ST-ZIP	FT. LAUDERDALE FL 33316	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Edward J. Domanico *President* 01/25/00 954-527-5135

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)