2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000011691

SIGNATURE

STATEWIDE REAL ESTATE INVESTMENT CO., INC.

Principal Place of Business

Mailing Address

1107 KEY PLAZA STE. 100

1107 KEY PLAZA STE. 100 KEY WEST FL 33040 KEY WEST FL 33040-4077 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Zip Country Zip Country 6. Name and Address of Current Registered Agent Name <u> ----- MEYER, JEFFREY-B</u> 31211 AVENUE A **BIG PINE KEY FL 33043** City

FILED Mar 13, 2000 8:00 am Secretary of State

03-13-2000 90042 035 ***150.00



T (BB) (BB) (In 1818) (Bit) mail abit bbit both both (1881) and bit at a the contract of the	
DO NOT WRITE IN THIS SPACE	

\$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent

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

65-0811650

Zip Code FL

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.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State

(NOTE: Registered Agent signature required when reinstating)

Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Applied For

Not Applicable

(See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition ☐ Change TITLE □ Delete TITLE D۷ NAME SELZ, ULRICH K STREET ADDRESS STREET ADDRESS 1107 KEY PLAZA STE. 100 CITY-ST-ZIP CITY-ST-ZIP KEY WEST_FL 33040 Addition ☐ Change TITLE ☐ Delete SELZ, MARGOT NAME NAME STREET ADDRESS STREET ADDRESS 1107 KEY PLAZA STE. 100 CITY-ST-ZIP CITY-ST-ZIE **KEY WEST FL 33040** ☐ Change ☐ Addition Delete TITLE TITLE **UNMUESSIG, PETER** NAME NAME - -STREET ADDRESS STREET ADDRESS 1107 KEY PLAZA STE. 100 CITY-ST-ZIP CITY-ST-ZIP KĘY WEST FL 33040 Addition ☐ Change ☐ Delete TITLE TITLE DTS SCHOEMIG, CHRISTIAN NAME STREET ADDRESS STREET ADDRESS 1107 KEY PLAZA STE. 100 CITY-ST-ZIP CITY-ST-ZIF KEY WEST FL 33040 Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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 TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRISTIAN SCHOEMIG 1/21/00

CR2E034 (9/99)