

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90032 015 ***150.00

DOCUMENT # **P98000016192**

1. Entity Name

CANICK ENTERPRISES, INC.

Principal Place of Business

Mailing Address

~~7508 NW 41 STREET~~
~~CORAL SPRINGS, FL~~
~~33065~~

~~7508 NW 41 STREET~~
~~CORAL SPRINGS, FL~~
~~33065~~

2. Principal Place of Business

3. Mailing Address

1925 NW 15 STREET
Suite, Apt. #, etc.
#1

5405 NW 108 WAY
Suite, Apt. #, etc.

City & State

City & State

POMPADOR BCH, FL

CORAL SPRINGS, FL

Zip
33069

Country
USA

Zip
33076

Country
USA

4. FEI Number

Applied For

65-0814967

Not Applicable

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

~~AMERILAWYER~~
~~343 ALMERIA AVE.~~
~~CORAL GABLES, FL 33134~~

Name **NICOLAE ANTON**
Street Address (P.O. Box Number is Not Acceptable)
5405 NW 108 WAY
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.

(NOTE: Registered Agent signature required when reinstating)

DATE

Niculae Anton

4/5/2001

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, 2001 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 ☐ Delete
NAME **D NICOLAE ANTON**
STREET ADDRESS ~~7508 NW 41 STREET~~
CITY-ST-ZIP ~~CORAL SPRINGS, FL 33065~~

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **5405 NW 108 WAY**
CITY-ST-ZIP **CORAL SPRINGS, FL 33076**

TITLE ☒ Delete
NAME **D CARMEN ANTON**
STREET ADDRESS ~~7508 NW 41 STREET~~
CITY-ST-ZIP ~~CORAL SPRINGS, FL 33065~~

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **5405 NW 108 WAY**
CITY-ST-ZIP **CORAL SPRINGS, FL 33076**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

Niculae Anton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/5/2001

Daytime Phone #