

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **998000017470**

1. Entity Name

AB Enterprises of DeBary, Inc

Principal Place of Business

Mailing Address

1351 Barrel Springs Trail
DeLand FL 32720

2. Principal Place of Business

1351 Barrel Springs Trail
Suite, Apt. #, etc.

DeLand FL 32720
City & State

Zip **32720**

Country **US**

3. Mailing Address

1351 Barrel Springs Trail
Suite, Apt. #, etc.

DeLand FL 32720
City & State

Zip **32720**

Country **US**

8. Name and Address of Current Registered Agent

Andy Brand
1351 Barrel Springs Trail
DeLand FL 32720

7. Name and Address of New Registered Agent

Name **Same**

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

City

FL

Zip Code

6. 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

Andy Brand **Pres. AB Enterprises of DeBary, Inc** **5/6/00**

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 **Andy Brand President** ☐ Delete
NAME
STREET ADDRESS **1351 Barrel Springs Trail**
CITY-ST-ZIP **DeLand FL 32720**

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

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

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

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

TITLE ☐ Change ☐ Addition
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:

Andy Brand **Pres. AB Enterprises of DeBary, Inc** **5/6/00**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

05-30-2000 90101 046 **150.00

FILED

SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUN 28 AM 6:57

00057955

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3492415

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

CR2E034 (9/99)

5/6/28

6/7