

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000023145

1. Entity Name

PEDMAR II. INC.

FILED

May 19, 2000 8:00 am  
Secretary of State

05-19-2000 90026 005 \*\*\*150.00

Principal Place of Business

Mailing Address

1905 N ATLANTIC BLVD  
SUITE E 5 D  
FT. LAUDERDALE FL 33305

1905 N ATLANTIC BLVD  
SUITE E 5 D  
FT. LAUDERDALE FL 33305-3747



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

3100 N. OCEAN BLVD

3100 N. OCEAN BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 602

SUITE 602

City & State

City & State

FT. LAUDERDALE FL.

FT. LAUDERDALE, FL.

4. FEI Number

65-0355465

Applied For

Not Applicable

Zip

Country

33308 BROWARD

Zip

Country

33308 BROWARD

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

PEDEN, WILLIAM K  
1905 N ATLANTIC BLVD  
SUITE E 5 D  
FT. LAUDERDALE FL 33305

Name

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

3100 N. OCEAN BLVD  
SUITE 602

City

FT. LAUDERDALE

FL

Zip Code

33308

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

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DPD  
PEDEN, WILLIAM K  
1905 N ATLANTIC BLVD STE E5D  
FT. LAUDERDALE FL 33305 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
3100 N. OCEAN BLVD Suite 602  
FT. LAUDERDALE FL. 33308 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

William K. Peden WILLIAM K. PEDEN 4-28-00 954-564-8585

CR2E034 (9/99)