

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000037215

1. Entity Name

ABSOLUTE AUCTION ON-LINE, INC.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90108 010 ***150.00

Principal Place of Business

11255 PINE FOREST DRIVE
 NEW PORT RICHEY FL 34654

Mailing Address

11255 PINE FOREST DRIVE
 NEW PORT RICHEY FL 34682-0249

2. Principal Place of Business

121 N. OSCEOLA AVE

3. Mailing Address

930 WEXFORD LEAS BLVD.

Suite, Apt. #, etc.

SUITE # 300

Suite, Apt. #, etc.

City & State

CLEARWATER, FL

City & State

PALM HARBOR, FL

Zip

33755

Country

Zip

34683

Country

USA

4. FEI Number

59-3507206

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

TITLE PD ☐ Delete
 NAME ROSE, JANICE L
 STREET ADDRESS 11255 PINE FOREST DRIVE
 CITY-ST-ZIP NEW PORT RICHEY FL 34654

TITLE SD ☒ Delete
 NAME FOSTER, JOSHUA S
 STREET ADDRESS 11255 PINE FOREST DRIVE
 CITY-ST-ZIP NEW PORT RICHEY FL 34654

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 121 N. OSCEOLA AVE
 CITY-ST-ZIP CLEARWATER, FL 33755

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

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

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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:

Janice Rose
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/2000

Date

(727)
 787-8277

Daytime Phone #