

2000 UNIFORM BUSINESS REPORT (UBR)

198

DOCUMENT # P98000049486

1. Entity Name

SAPPHIRE INDUSTRIES, INC.

FILED

00 DEC 26 PM 12:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

4969 SW 33RD WAY
HOLLYWOOD, FL 33312

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For

Zip

Country

Zip

Country

65-0869455

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NATAN SUSTIEL
4969 SW 33RD WAY
HOLLYWOOD, FL 33312

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PS
NATAN SUSTIEL
4969 SW 33RD WAY
HOLLYWOOD, FL 33312 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
100003534071--9
-01/12/01--01008--010
****550.00 ****550.00 ☐ Change ☐ Addition

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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 #

NATAN SUSTIEL

12/16/01

SP

202

SAPPHIRE INDUSTRIES, INC.
4969 SW 33RD WAY
HOLLYWOOD, FLORIDA 33312

December 18, 2000

Department of state
Division of Corporations
409 East Gaines St.
Tallahassee, FL 32399

Re: Corporation renewal


Dear Sir or Madam:

I ask that the penalty for the failure to file an annual report be waived. I never received the notices to renew and I only found out about it from my attorney. The business location moved. The penalty will create a hardship for my business and ask that you please waive it.

Enclosed is my reinstatement form with my fee of \$550.00 for the year 2000.

Thank you very much for your help and understanding.

Sincerely,


Nathan Sustiel, President