

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 31, 2000 8:00 am
Secretary of State

01-31-2000 90108 005 ***150.00

DOCUMENT # P98000052402

1. Entity Name:
SNIP OF DEL MAR, INC.

Principal Place of Business 7134 PERACASA WAY BOCA RATON FL 33433	Mailing Address 331 WILDWOOD CIR. DEERFIELD BCH FL 33442-1436
---	---



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address 516 DEER CREEK RUN	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State DEERFIELD BEACH FL	
Zip	Country	Zip 33442	Country USA

4. FEI Number 65-0844598	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**MYERS, JOHN F JR.
 331 WILDWOOD CIR.
 DEERFIELD BCH FL 33442**

7. Name and Address of New Registered Agent
 Name: **SAME**
 Street Address (P.O. Box Number is Not Acceptable):
**516 DEER CREEK RUN
 DEERFIELD BEACH FL 33442**

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: **John F. Myers Jr. Pres** DATE: **1-10-2000**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 VD	<input type="checkbox"/> Delete
NAME MYERS, JOHN F JR.	
STREET ADDRESS 331 WILDWOOD CIR.	
CITY-ST-ZIP DEERFIELD BCH FL 33442	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS 516 DEER CREEK RUN	
CITY-ST-ZIP DEERFIELD BCH FL 33442	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: **John F. Myers Jr** DATE: **1-10-2000** DAYTIME PHONE #: **954-725-0764**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR