

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000053553

1. Entity Name

PROSPERITY POINTE SERVICES, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90168 004 ***150.00

Principal Place of Business

Mailing Address

13281 CRISA DRIVE
 PALM BEACH GARDENS FL 33410

POST OFFICE BOX 32274
 PALM BEACH GARDENS FL 33420-2274

2. Principal Place of Business

521 N. Old Dixie Hwy.
 Suite, Apt. #, etc.

3. Mailing Address

521 N. Old Dixie Hwy.
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Tequesta FL

City & State

Tequesta FL

4. FEI Number

65-0844268

Applied For

Not Applicable

Zip

Country

33469-2344

Palm Beach

Zip

Country

33469-2344

Palm Beach

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

AMERILAWYER
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134

Name

Judith A. Rothenberg

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

521 N. Old Dixie Hwy.

City

Tequesta

FL

Zip Code

33469-2344

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

Judith A. Rothenberg

4/20/2000

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
 PTD
 ROTHENBERG, BRUCE M
 13281 CRISA DRIVE
 PALM BEACH GARDENS FL 33410 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 PTD
 Rothenberg, Bruce M
 11586 SE Plandome Drive
 Hobe Sound FL 33455 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 SVD
 ROTHENBERG, JUDITH A
 13281 CRISA DRIVE
 PALM BEACH GARDENS FL 33410 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 SVD
 Rothenberg, Judith A
 11586 SE Plandome Drive
 Hobe Sound FL 33455 ☒ 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

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:

Judith A. Rothenberg

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)