

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000061220

1. Entity Name

R&S REGAL ENTERPRISES, INC.

FILED

00 SEP 26 PM 3:28

Principal Place of Business

1009 NE ANCHORAGE DR.
JENSEN BEACH FL 34957

Mailing Address

1009 NE ANCHORAGE DR.
JENSEN BEACH FL 34957

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

same

3. Mailing Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0849944

Applied For

Not Applicable

Zip

Country

U.S.A.

Zip

Country

U.S.A.

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

OOSTDYK, STEVE
846 NE VANDE TERRADO
JENSEN BEACH FL 34957

7. Name and Address of New Registered Agent

Name

ROGER HEGEWALD

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

#6 NORTH WARNER DR.

City

JENSEN BEACH

FL

Zip Code

34957

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

Roger Hegewald

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

8/21/00

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 D ☒ Delete
NAME OOSTDYK, STEVE
STREET ADDRESS 846 NE VANDE TERRADO
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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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 PD. ☐ Change ☒ Addition
NAME ROGER HEGEWALD
STREET ADDRESS 1009 N/E ANCHORAGE DR.
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE T.S. & V.P. ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME 200003419172-4
STREET ADDRESS -10/09/00--01071--011
CITY-ST-ZIP *****750.00 *****750.00

TITLE ☐ Change ☐ Addition
NAME 200003419172-4
STREET ADDRESS -10/09/00--01071--012
CITY-ST-ZIP *****8.75 *****8.75

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

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:

ROGER HEGEWALD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #