

2000 UNIFORM BUSINESS REPORT (UBR)

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

05-09-2000 90016 002 ***158.75

DOCUMENT # **P98000063199**
 1. Entity Name
T. M. J. LINBINK, INC.

Principal Place of Business Mailing Address
1940 HARRISON ST, #203 SAME
HOLLYWOOD, FL 33020

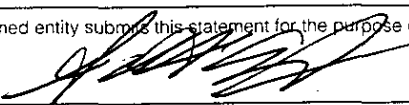
2. Principal Place of Business 3. Mailing Address
2699 STIRLING ROAD SAME
 Suite, Apt. #, etc. Suite, Apt. #, etc.
SUITE A-201
 City & State City & State
FT. LAUDERDALE, FL
 Zip Country Zip Country
33312 USA

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0844606** Applied For
 Not Applicable
 5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
ITKIN, SCOTT B.
1940 HARRISON ST, #203
HOLLYWOOD, FL 33020

7. Name and Address of New Registered Agent
 Name **ITKIN, SCOTT B.**
 Street Address (P.O. Box Number is Not Acceptable)
2699 STIRLING ROAD
SUITE A-201
 City **FORT LAUDERDALE FL** Zip Code **33312**

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  DATE **4/26/00**
 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 | PD | <input checked="" type="checkbox"/> Delete |
| NAME | SCOTT B. ITKIN | |
| STREET ADDRESS | 1940 HARRISON ST, 203 | |
| CITY-ST-ZIP | HOLLYWOOD, FL 33020 | |
| TITLE | VST | <input type="checkbox"/> Delete |
| NAME | DOBOVICHIAN, THOMAS | |
| STREET ADDRESS | 1940 HARRISON ST, 203 | |
| CITY-ST-ZIP | HOLLYWOOD, FL 33020 | |
| 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 | PD | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | ITKIN, SCOTT B. | |
| STREET ADDRESS | 2699 STIRLING RD A201 | |
| CITY-ST-ZIP | FORT LAUDERDALE, FL 33312 | |
| TITLE | PVST | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | DOBOVICHIAN, THOMAS | |
| STREET ADDRESS | 2699 STIRLING RD A201 | |
| CITY-ST-ZIP | FORT LAUDERDALE, FL 33312 | |
| 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:  **SCOTT B. ITKIN** DATE **4/26/00** DAYTIME PHONE # **954-985-8188**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR25034 (9/99)