

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90200 013 ***150.00

DOCUMENT # P98000070055

1. Entity Name

CAUSEY EQUIPMENT REPAIR, INC.

Principal Place of Business

10791 NW 53RD STREET
 BAY #101
 SUNRISE FL
 US

Mailing Address

11280 NW 12TH STREET
 PLANTATION FL 33323-2444

2. Principal Place of Business

10791 N.W. 53rd Street
 Suite, Apt. #, etc.
 Bay #101

3. Mailing Address

11280 N.W. 12th Street
 Suite, Apt. #, etc.

City & State

Sunrise, FL

City & State

Plantation, FL

Zip 33351

Country U.S.A.

Zip 33323

Country U.S.A.

4. FEI Number

65-0856488

Applied For

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

CAUSEY, CURTIS L
 11280 NW 12TH STREET
 PLANTATION FL 33323

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 PD Delete
 NAME **CAUSEY, CURTIS L**
 STREET ADDRESS **11280 NW 12TH STREET**
 CITY-ST-ZIP **PLANTATION FL 33323**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE STD Delete
 NAME **CAUSEY, WENDY K**
 STREET ADDRESS **11280 NW 12TH STREET**
 CITY-ST-ZIP **PLANTATION FL 33323**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
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 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: Curtis L. Causey
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/00 954-572-2516
 Date Daytime Phone #

CR2E034 (9/99)