## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 07, 2000 8:00 am Secretary of State DOCUMENT # **P98000077250** 1. Entity Name SOUTHERN COAST INVESTMENTS, INC. 03-07-2000 90073 034 \*\*\*150.00 Principal Place of Business Mailing Address 227 LAKEVIEW DR., UNIT 202 227 LAKEVIEW DR., UNIT 202 FT. LAUDERDALE FL 33326 FT. LAUDERDALE FL 33326-1015 2. Principal Place of Business 3. Mailing Address 2800 E. Sunrise Blvd. 2800 East Sunrise Blvd. Suite, Apt. #, etc. Penthouse H Suite, Apt. #, etc. Penthouse H DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-1754124 Fort Lauderdale, FL Fort-Lauderdale, FL 111 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 33304 33304 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Haecherl, Zane HAECHERL, ZANE Street Address (P.O. Box Number is Not Acceptable) 2800 East Sunrise Blvd. 227 LAKEVIEW DR., UNIT 202 FT. LAUDERDALE FL 33326 Penthouse H City Fort Lauderdale 33384 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. 3/2/00 Signature, typed or pr (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After M/NY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. PT X Change ☐ Addition TITLE ☐ Delete TITLE HAECHERL, ZANE NAME Haecherl, Zane STREET ADDRESS 227 LAKEVIEW DR., UNIT 202 STREET ADDRESS 2800 East Sunrise Blvd., Penthouse H CITY-ST-ZIP FT. LAUDERDALE FL 33326 CITY-ST-ZIP <u>Lauderdale, FL 33304</u> Change ☐ Addition TITLE ☐ Delete TITLE Moore, J. Byron II MOORE, J. BYRON II NAME NAME 2800 East Sunrise Blvd., Penthouse H 227 LAKEVIEW DR., UNIT 202 STREET ADDRESS STREET ADDRESS Ft. Lauderdale, FL 33304 CITY-ST-ZIP FT. LAUDERDALE FL 33326 CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SCHAPLE SECTION

☐ Delete

03/02/00

954-384-4348

Date

Daytime Phone #

Change

☐ Addition

CR2E034 (9/99