

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000081070

1. Entity Name

SEPT. 22, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90104 002 ***150.00

Principal Place of Business

6999 N.E. 8TH DRIVE
BOCA RATON FL 33487

Mailing Address

6999 N.E. 8TH DRIVE
BOCA RATON FL 33487-2414

00075751



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2034 N.E. 155th St
Suite, Apt. #, etc.

3. Mailing Address

2034 N.E. 155th St
Suite, Apt. #, etc.

City & State

N. MIAMI BEACH, FL

City & State

N. MIAMI BEACH, FL

4. FEI Number

52-2202220

Applied For

Not Applicable

Zip

Country

33162 DALE

Zip

Country

33162 DALE

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NELSON, RICHARD
6999 N.E. 8TH DRIVE
BOCA RATON FL 33487

Address Change →

7. Name and Address of New Registered Agent

Name: RICHARD NELSON

Street Address (P.O. Box Number is Not Acceptable): 2034 N.E. 155th St.

City: N. MIAMI BEACH FL Zip Code: 33162

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

4/11/2000

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: D
NAME: NELSON, RICHARD
STREET ADDRESS: 6999 N.E. 8TH DR.
CITY-ST-ZIP: BOCA RATON FL 33487

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☒ Change ☒ Addition
NAME: RICHARD NELSON
STREET ADDRESS: 2034 N.E. 155th St.
CITY-ST-ZIP: N. MIAMI BEACH, FL 33162

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

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

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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 of an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/11/2000

CR2E034 (9/99)