

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000081968

1. Entity Name

BOCA INFOMASTERS, INC

FILED

May 22, 2000 8:00 am
Secretary of State

05-22-2000 90045 021 ***150.00

Principal Place of Business

11150 DELTA CIRCLE
BOCA RATON FL 33428

Mailing Address

11150 DELTA CIRCLE
BOCA RATON FL 33428-3974

2. Principal Place of Business

21772 Banyanwood Rd.
Suite, Apt. #, etc.

3. Mailing Address

21772 Banyanwood Rd.
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Boca Raton Florida
Zip
33433
Country
USA

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Boca Raton Florida
Zip
33433
Country
USA

4. FEI Number

65-0866529

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARONE, JOSEPH D
11150 DELTA CIRCLE
BOCA RATON FL 33428

7. Name and Address of New Registered Agent

Name
Joseph D. Marone

Street Address (P.O. Box Number is Not Acceptable)
21772 Banyanwood Rd.

City
Boca Raton

FL

Zip Code
33433

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

Joseph D. Marone
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)
DATE 5/1/00

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 NAME STREET ADDRESS CITY-ST-ZIP	P MORONE, JOSEPH D 11150 DELTA CIR BOCA RATON FL 33128	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Marone, Joseph D. 21772 Banyanwood Rd. Boca Raton, Florida 33433	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph D. Marone
Date 5/1/00 Daytime Phone # 561-477-0208

CR2E034 (9/99)