

# 2000 UNIFORM BUSINESS REPORT (UBR)

10f2

DOCUMENT # P980000088330

1. Entity Name

DURI, INC.

FILED

00 JUL 14 PM 1:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

1188 NE 47 St.

Ft. Lauderdale, FL 33334

Same

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0868083

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Juraj Majovsky

1188 NE 47 Street

Ft. Lauderdale, FL 33334

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 D, P  
NAME Juraj Majovsky  
STREET ADDRESS 1188 NE 47 Street  
CITY-ST-ZIP Ft. Lauderdale, FL 33334

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

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CITY-ST-ZIP

☐ Change

☐ 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.

SIGNATURE: X [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 03/15/00

Date

(954) 772-8419

Daytime Phone #

KE

2 of 2

**DURI, INC.**  
**1188 NE 47 STREET**  
**FT. LAUDERDALE, FL. 33334**

July 10, 2000

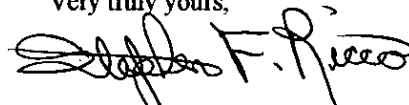
Ms. Kristen Eckel  
Document Specialist  
Florida Dept. of State  
P.O. Box 6327  
Tallahassee, FL. 32314

Ref. # P98000088330

Dear Ms. Eckel:

We have received your letter dated 6/20/00, copy attached. We enclose herewith our check # 2441 for \$ 150.00 to replace original check # 2649, dated 4/10/00. A copy of our 4/00 bank statement and the Stop Payment order is attached. We trust you will find this package to be proper order, and we ask that our Corporation be restored to active status accordingly. Thank you in advance for your assistance in this matter.

Very truly yours,



Stephen F. Ricco  
Accountant for Duri, Inc.