

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000094396

1. Entity Name

INTUTEL, INC.

FILED

May 05, 2000 8:00 am
Secretary of State

05-05-2000 90054 020 ***150.00

Principal Place of Business

Mailing Address

160 YACHT CLUB WAY
307
HYPOLUXO FL 33462

P. O. BOX 1317
DELRAY BCH FL 33447-1317

2. Principal Place of Business

3. Mailing Address

40 NE 7th Ave
Suite, Apt. #, etc.
3rd Floor

Suite, Apt. #, etc.

City & State
Delray Beach FL

City & State

Zip
33483

Country
Palm Beach

Zip

Country

4. FEI Number 65-0873682

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

BABUSIK, FRANK
160 YACHT CLUB WAY
307
HYPOLUXO FL 33462

Name: ~~Frank Babusik~~
Street Address: ~~40 NE 7th Ave 3rd Floor~~
City: ~~Delray Beach~~ FL Zip Code: ~~33483~~

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: Frank Babusik / President DATE: 04/10/00
(NOTE: Registered Agent signature required when reinstating)

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: P
NAME: BABUSIK, FRANK
STREET ADDRESS: 160 YACHT CLUB WAY #307
CITY-ST-ZIP: HYPOLUXO FL 33462 ☐ Delete

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

TITLE: T
NAME: BOUDBY, DAVID
STREET ADDRESS: 160 YACHT CLUB WAY #307
CITY-ST-ZIP: HYPOLUXO FL 33462 ☐ Delete

TITLE: ☒ Change ☐ Addition
NAME: Bowby, David
STREET ADDRESS: 180 Yacht Club Way #102
CITY-ST-ZIP: Hypoluxo FL 33462

TITLE: S
NAME: BONN, MARK A
STREET ADDRESS: P.O. BOX 1356
CITY-ST-ZIP: TALLAHASSEE FL 32302 ☐ Delete

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

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

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

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

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

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

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
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)(f), 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 life empowered.

SIGNATURE:

Frank Babusik
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/10/00
Date

561-278-2850
Daytime Phone #