

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000100177

1. Entity Name

EXPERT TAXI, INC.

FILED
Mar 09, 2000 8:00 am
Secretary of State

03-09-2000 90090 023 ***150.00

Principal Place of Business

Mailing Address

4907 NORTHEAST 12TH AVENUE
 OAKLAND PARK FL 33334

4907 NORTHEAST 12TH AVENUE
 OAKLAND PARK FL 33311-7338

2. Principal Place of Business

3. Mailing Address

500 NW 8 St.

500 NW 8 St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
 Fort Lauderdale, FL
 Zip
 33311
 Country
 USA

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 33311
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4. FEI Number 65-0880393

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

WOLK, LOREN S
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134

Name MR. LOREN S. WOLK

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

500 NW 8 St.

City Fort Lauderdale

FL

Zip Code 33311

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 Mr. Loren S. Wolk Pres.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3-6-00

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 PTD
 NAME WOLK, LOREN S
 STREET ADDRESS 4907 NORTHEAST 12TH AVENUE
 CITY-ST-ZIP OAKLAND PARK FL 33334 ☐ Delete

TITLE President & Treasurer
 NAME MR. LOREN S. WOLK
 STREET ADDRESS 500 NW 8 St.
 CITY-ST-ZIP Ft. Lauderdale, FL 33311 ☒ Change ☐ Addition

TITLE SVD
 NAME PINCKET, ROBERT J
 STREET ADDRESS 4907 NORTHEAST 12TH AVENUE
 CITY-ST-ZIP OAKLAND PARK FL 33334 ☐ Delete

TITLE Vice President & Secretary
 NAME Robert J. Pincket
 STREET ADDRESS 500 NW 8 St.
 CITY-ST-ZIP Fort Lauderdale, FL 33311 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
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 CITY-ST-ZIP ☐ Change ☐ Addition

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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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mr. Loren S. Wolk Pres.

3-6-00

Date

Daytime Phone #

954-463-8294