

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000102700

1. Entity Name

G.B.E. ACQUISITIONS, INC.

FILED
Apr 14, 2000 8:00 am
Secretary of State

04-14-2000 90105 021 ***150.00

Principal Place of Business

Mailing Address

250 VALENCIA AVENUE
CORAL GABLES FL 33134

250 VALENCIA AVENUE
CORAL GABLES FL 33134-5906

2. Principal Place of Business

1828-B N. University Dr.

Suite, Apt. #, etc.

3. Mailing Address

1828-B N. University Dr.

Suite, Apt. #, etc.

City & State

Plantation, FL

City & State

Plantation, FL

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

33322

Country

Zip

33322

Country

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

MILLER, GEORGE
250 VALENCIA AVENUE
CORAL GABLES FL 33134

Name

MILLER, GEORGE

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

1828-B N. University Dr.

City

Plantation

FL

Zip Code
33322

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 date applied for

George Miller

4/5/2000

DATE

(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 ☐ Delete
NAME D
STREET ADDRESS MILLER, GEORGE
CITY-ST-ZIP 250 VALENCIA AVENUE
CORAL GABLES FL 33134

TITLE ☒ Change ☐ Addition
NAME D
STREET ADDRESS MILLER, GEORGE
CITY-ST-ZIP 1828-B N. University Dr.
Plantation, FL 33322

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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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 on an attachment with an address, with all other like empowered

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George Miller
Director

4/1/2000

Date

954-452-4908

Daytime Phone #

CR2E034 (9/99)