

2000 UNIFORM BUSINESS REPORT (UBR)

Page 1 of 2

0120981

DOCUMENT # P98000108269

1. Entity Name

XSTREME CHARTERS, INC.

FILED

00 JUN 27 PM 5:45

SECRETARY OF STATE,
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

WORCHESTER WY
ISLAND FL 32953

1965 WORCHESTER WY
MERRITT ISLAND FL 32953-2624

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3546853

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VANDERHOEVEN, MARK A
1965 WORCHESTER WY
MERRITT ISLAND FL 32953

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 NAME STREET ADDRESS CITY-ST-ZIP	D TRAVERN, ROBERT W P.O. BOX 540610 MERRITT ISLAND FL 32954	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400003327584-9 -07/19/00-01037-016 ****150.00 ****150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VANDERHOEVEN, MARK A 1965 WORCHESTER WY MERRITT ISLAND FL 32953	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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

Date

Daytime Phone #

6-19-00

321-720-6275

TS

6-19-2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Fl 32303-1500


To whom it may concern:

This is a letter of explanation for the late filing of the attached UBR and a petition of leniency in this matter.

For the past several months I have had to care for the needs of my terminally ill father. As the sole employee of my company, to say the least, I have been distracted from the duties of running the affairs of my company. To put it simply, May 1st came and went and I regretfully forgot about filing on time until now.

If the State offers any merciful exceptions regarding the additional filing penalty I would be very grateful.

Thank you for your attention on this matter,

Mark Vanderhoeven

Xstreme Charters Inc.
1965 Worchester Way
Merritt Island, Fl 32953
(321) 720-6275