

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P99000002035**

1. Entry Name

SEIDMAN AND DAUGHTERS HOME IMPROVEMENTS INC.**FILED****00 FEB 28 AM 11:39****SECRETARY OF STATE
TALLAHASSEE, FLORIDA****C0009128**

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

127 S.W. 42ND TERRACE
CAPE CORAL FL 33914127 S.W. 42ND TERRACE
CAPE CORAL FL 33914-8311

2. Principal Place of Business

127 S.W. 42ND TER.

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Cape Coral, FL 33914

City & State

4. FEI Number

52-1353273

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SEIDMAN, BERTRAM B
127 S.W. 42ND TERRACE
CAPE CORAL FL 33914

7. Name and Address of New Registered Agent

Name

BERT SEIDMAN (Same)

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

1/15/2000

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PRESIDENT** ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

S Bertram Seidman
127 SW 42nd Ter
Cape Coral, FL 33914-8311

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

S Vice-President
Bertram Seidman
127 SW 42nd Ter
Cape Coral, FL 33914-8311

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

S TREASURER
Bertram Seidman
127 SW 42nd Ter
Cape Coral, FL 33914-8311

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change☐ Addition**KE**

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 or without power.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bertram B. Seidman President/owner
Bertram B. Seidman

JAN. 15, 2000

941-542-6828

Date

Daytime Phone #

Pager 941-330-5310