2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000002683 May 08, 2000 8:00 am Secretary of State SALES DESIGN AND MARKETING, INC. 05-08-2000 90118 025 ***150.00 Mailing Address Principal Place of Business 9941 85TH ST 9941 85TH ST NORTH LARGO FL 33777-1927 NORTH LARGO FL' 33777 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For City & State City & State Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SMITH, WALTER J Street Address (P.O. Box Number is Not Acceptable) 9941 85TH ST NORTH LARGO FL 33777 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 (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change ☐ Addition TITI F TITLE ☐ Delete SMITH, WALTER J NAME NAME STREET ADDRESS STREET ADDRESS 9941 85TH ST CITY-ST-ZIP NORTH LARGO FL 33777 CITY-ST-ZIP ☐ Addition Change □ Delete TITLE TITLE SMITH, DEREK J NAME STREET ADDRESS STREET ADDRESS 9941 85TH ST CITY-ST-ZIP CITY-ST-ZIP NORTH LARGO FL 33777 Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-70P 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 this see amounted 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