

2000 UNIFORM BUSINESS REPORT (UBR)

7/1

FILED
Aug 17, 2000 8:00 am
Secretary of State

07-12-2000 90007 033 ***150.00

DOCUMENT # P99000004028

1. Entity Name

INTEGRITY IMPORTS, INC. OF SOUTH FLORIDA

Principal Place of Business

6194 NORTH FEDERAL HIGHWAY
 BOCA RATON FL 33487

Mailing Address

6194 NORTH FEDERAL HIGHWAY
 BOCA RATON FL 33487-3539

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0887610

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

COLEMAN, ANTHONY G JR.
 6194 NORTH FEDERAL HIGHWAY
 BOCA RATON FL 33487

7. Name and Address of New Registered Agent

Name

STEVEN KOZAK

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

2105 LAVERS CIRCLE #206

City

Del R

FL

Zip Code

33444

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, 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

TITLE	D	☐ Delete
NAME	KOZAK, TODD	
STREET ADDRESS	6194 NORTH FEDERAL HIGHWAY	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE	D	☐ Delete
NAME	KOZAK, STEVEN	
STREET ADDRESS	6194 NORTH FEDERAL HIGHWAY	
CITY-ST-ZIP	BOCA RATON FL 33487	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V.P./S	☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
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)(a), 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

VP 6-29-00

Date

Daytime Phone #

CR2E034 (9/99)

Attachment
DHP 9900004027
107261

To: whom it may concern (IRS):

6-29-00

This notice was not received.
Please note the new address for Contingent
Imports.

Payment is enclosed,

Sincerely,

Steven Kosh
CO-IMPORTS Imports of S. Flower