2000 UNIFORM BUSINESS REPORT (UBR)

1. Entity Name	MENT # P99000 C VI DEVELOPMENT, INC.	05262	• •		Secr	FILED 12, 2000 8 etary of S	State
Principal Place of Business Mailing Address					03-08-	2000 90051 014 ***	*150.00
2801 E. OAKLAND PARK BLVD., STE. 604 FT. LAUDERDALE FL 33306		2601 E. OAKLAND PARK BLVD., STE, 604 FT, LAUDERDALE FL 33306-1617					
_					# (00 017#601 11 0 3 0 110 18711 03 781 0	Haran kenak banga banga pakan dahan dahan	HIL a 19 0 0 1 90 0
2. Principal Plants	ace of Business Sederal Hory	3. Mailing Address	" u				
Suite, Apt. #		Suite, Apt. #, etc.			DO NOT W	RITE IN THIS SPACE	
City & State		City & State	10		. FEI Number		oplied For
Ht. Olice Zip	Country	St Sanderd	Country		<u> 59 - 3435567</u>	¢0.75	of Applicable
33304	6. Name and Address of Current	33304	USA		. Certificate of Status Desired	Fee Require	
	o. Name and Address of Current	Registered Agent	Name		Name and Address of New	Registered Agent	
COOK, RICHARD E				Street Address (P.O. Box Number is Not Acceptable)			
	E. OAKLAND PARK BLVD., STE. AUDERDALE FL 33306	504	1500		N. Federal Hury. #202		
			City	Ja	Le a a	FL Zip Sign	
8. The above	named entity submits this statement for	withs purpose of chay ging it	s registered office	or registered :	agent, or both, in the State of		09
	Littered				. .	3-3-00	
SIGNATURE _	Signature, typed or printed name of registered agent	and title if applicable. (NO	TE. Registered Agent sig		F. Cook on reinstating)	DATE	
Tax filing re	ration is eligible to satisfy its Intangible equirement and elects to do so. ia on back)		III FEE IS \$150 000 Fee will be able to Departme	\$550.00	10. Election Campaign Trust Fund Contribu	. — .	DO May Be ed to Fees
11.	OFFICERS AND	DIRECTORS	12.		ADDITIONS/CHANGES TO C		
TITLE NAME	D COOK, RICHARD E	Delete	TITLE NAME		. 4 4 4	Change	CRZEO34 (9/99)
STREET ADDRESS	DURESS 2601 E. OAKLAND PARK BLVD., STE. 604			STREET ADDRESS 1500 N. Sederal Hury. #202 CITY-ST-ZIP St. Laudersole, Al. 33304			
CITY-ST-ZIP TITLE	FT. LAUDERDALE FL 33306	☐ Delete	TITLE	- CO.C	Juicerosse	☐ Change	Addition S
NAME OVERT ADDRESS			NAME OTROCT + DDOCE	.,			
STREET ADDRESS CITY-ST-ZIP			STREET ADDRES CITY-ST-ZIP	8		_	
TITLE NAME	7.	- · · · Delete -	TITLE		•	☐ Change	Addition
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CITY-ST-ZIP			CITY-ST-ZIP	<u> </u>		☐ Change	Addition
NAME		Delete	NAME			Criange	Acoution
STREET ADDRESS CITY-ST-ZIP			STREET ADDRES	S			i i
TIFLE		☐ Delete	TITLE			☐ Change	Addition
NAME STREET ADDRESS			NAME STREET ADDRE	ss			
CITY-ST-ZIP			CITY-ST-ZIP				
TITLE		☐ Oelete	TITLE NAME			Change	Addition
STREET ADDRESS			STREET ADDRE	ss			
CITY-\$1-ZIP	certify that the information supplied wi	th this filing does not qualify	for the exemption	stated in Secti	ion 119.07(3\(i) Florida Statut	es. I further certify that the	e information
indicated of the co	on this report or supplemental report rooration or the receiver or trustee emit, or on an attachment with an address	is true and accurate and the powered to execute this repo	it my signature sha ort as required by	all have the sar	me legal effect as if made und	der oath; that I am an offic	er or director
SIGNAT		PRINTED HAME OF SIGNING OFFICE		ard S	. Cook 3-3-0	0 954-56 Daytime Phone	7-9308