2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P99000015405**

1. Entity Name

MULLER APPLIANCE SERVICE, INC.

Principal Place of Business		Mailing Address					
2116 NORTH UNIVERSITY DRIVE SUNRISE FL 33322		2116 NORTH UNIVERSITY DF SUNRISE FL 33322-3939	NVE				
					1 1881/181 (18 181/18 181/18 181/18 181/18 181/18 181/18 181/18 181/18 181/18 181/18 181/18 181/18 181/18 181/		(4.) 6 (1) 1 66
2. Principal Place of Business		3. Mailing Address 11110 HERON BAY BLUD,		UD,			
Suite, Apt. #, etc.		Suite, Apt. #, etc. APT 316			DO NOT WRITE	IN THIS SPACE	
City & State		CORAL SPRINGS, FL		L 4	4. FEI Number 65-090274	16 No	plied For t Applicable
Zip	Country	^{Zip} 33076	Country S	5	5. Certificate of Status Desired	\$8.75 Add Fee Required	
	6. Name and Address of Current F	legistered Agent		7	. Name and Address of New Reg	istered Agent	
			- Name	Jĩu	L FISHGOLD	-=	{
SPIEGEL & UTRERA, P.A.		<u> </u>			(D.O. Boy Number is Not Assessable)		
343 ALMERIA AVENUE CORAL GABLES FL 33134					110 HERON BAY BLUD.		
					APT 316		
			City			Zip Code	e -/
				<u>Cori</u>	al Springs	FL Zip 3	3076
8. The above	named entity submits this statement for	the purpose of changing its re	egistered office or re	gistered	agent, or both, in the State of Florid	la.	
		also I d	3		HOOLD TAD.	4/28/00	-
SIGNATURE .	Jel Ta	syva]
	Signature, types or printed name of registered agent as	nd title if applicable. (NOTE.	Registered Agent signature r	required whe	en reinstating)	DATE	{
	<u> </u>						
	pration is eligible to satisfy its Intangible	FILE NOW!!!	FEE IS \$150.00		10 Election Campaign Finan	cing \$5.0	O May Bo
9. This corpo Tax filing re	equirement and elects to do so.	After MAY 1, 200	0 Fee will be \$550	0.00	10. Election Campaign Finan Trust Fund Contribution.		O May Be
9. This corpo Tax filing re			0 Fee will be \$550	0.00 of State	Trust Fund Contribution.	Added	to Fees
9. This corpo Tax filing re	equirement and elects to do so. ria on back) OFFICERS AND D	After MAY 1, 200 Make Check Payable DIRECTORS	Fee will be \$550 to Department o	0.00 of State		Added	I to Fees
9. This corpo Tax filing re (See criter 11.	equirement and elects to do so. ia on back) OFFICERS AND D	After MAY 1, 200 Make Check Payable	D Fee will be \$550 to Department o	0.00 of State	Trust Fund Contribution.	Added	to Fees
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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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JILL FISHGOLD

4/28/00

FILED

May 19, 2000 8:00 am Secretary of State

05-19-2000 90100 025 ***158.75

749-5460

Daytime Phone #