

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000016531

1. Entity Name

EMERALD INTERNET SERVICES, INC.

FILED
Sep 12, 2000 8:00 am
Secretary of State

09-12-2000 90238 039 ***150.00

Principal Place of Business

10349 EMERALD WOODS AVE.
 ORLANDO FL 32836

Mailing Address

10349 EMERALD WOODS AVE.
 ORLANDO FL 32836

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3559663

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZAVER, ZUL
 10349 EMERALD WOODS AVE.
 ORLANDO FL 32836

Name

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

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 \$550.00

**After SEPTEMBER 13, 2000 Min. will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing

Trust Fund Contribution.

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**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME ZAVER, ZUL
 STREET ADDRESS 10349 EMERALD WOODS AVE.
 CITY-ST-ZIP ORLANDO FL 32836

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 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)(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 another like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

9/8/00 407.354.0761

Attachment
P99060016531
A0076862

Emerald Internet Services Inc.
10349 Emerald Woods Ave
Orlando, FL 32836
(407) 354-0761

September 8, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir/Madam

Please find enclosed a check in the sum of \$150.00 for the Uniform Business Report filing fee.

Please be advised that I never received the First Notice. During this time I was on a contract up in Atlanta, GA. However my wife assures me that she did not receive this notice.

I am asking for your indulgence in this matter for once. As you can see I am just a tiny company and I cannot afford these kind of fees.

Thanking you in anticipation.

Yours truly



Zul E. Zaver