

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000017832

1. Entity Name
R.I.P. ENTERPRISES, INC.

FILED
Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90092 046 ***150.00

Principal Place of Business
6550 N. FEDERAL HWY. STE. 340
FT. LAUDERDALE FL 33308

Mailing Address
6550 N. FEDERAL HWY. STE. 340
FT. LAUDERDALE FL 33308

UUU17811



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3483 Woolbright Road
Suite Apt. #, etc.

3. Mailing Address
3483 Woolbright Road
Suite Apt. #, etc.

City & State
Boynton Beach
Zip
33436
Country
USA

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Boynton Beach
Zip
33436
Country
USA

4. FEI Number 65-0894970
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
PUMA, JEFFREY C
6550 N. FEDERAL HWY, STE. 340
FT. LAUDERDALE FL 33308

7. Name and Address of New Registered Agent
Name
Puma, Jeffrey C.
Street Address (P.O. Box Number is Not Acceptable)
6550 N. Federal Hwy, Suite 240
City
Ft. Lauderdale
FL
Zip Code
33308

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 Jeffrey C Puma JEFFREY C PUMA 1-18-01
(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, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	P FELDSTEIN, FRED 6550 N. FEDERAL HWY STE 340 FORT LAUDERDALE FL 33308	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SLUTSKY, KEN 6550 N. FEDERAL HWY FORT LAUDERDALE FL 33308	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3483 Woolbright Road Boynton Beach, FL 33436	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3483 Woolbright Road Boynton Beach, FL 33436	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: FRED FELDSTEIN 2/10/01 561.733-4145
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)