## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Sep 18, 2000 8:00 am Secretary of State DOCUMENT # **P99000018842** 1. Entity Name COLDITZ BUSINESS DEVELOPMENT, INC. 09-18-2000 90033 021 \*\*\*150.00 Mailing Address Principal Place of Business 8100 CLEARY BLVD. 8100 CLEARY BLVD. **SUITE 1011** SUITE 1011 PLANTATION FL 33324 PLANTATION FL 33324 2. Principal Plage of Busines 3. Mailing Address £(4<u>5</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 200. 2007 4. FEL Number ity & State Applied For & State resch Not Applicable Polm Beach Country \$8.75 Additional 5. Certificate of Status Desired Beach Polm Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROSE, PETER A Street Address (P.O. Box Number is Not Acceptable) 2101 N ANDREWS AVE SUITE 200 FT. LAUDERDALE FL 33324 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min, will be \$750,00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. **PSD** PSD ☐ Addition TITLE Change TITLE ☐ Delete COLDITZ, WILLIAM COLDITZ WILLIAM NAME NAME 211 VID D-Este #2007 STREET ADDRESS 8100 CLEARY BLVD. STE 1011 STREET ADDRESS CITY-ST-ZIP PLANTATION FL 33324 CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP . CITY-ST-ZIP ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C/TY-ST-7IP ☐ Change ☐ Addition TITLE Delete TITLE

13. I hereby certify that the information supplied with this filling 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 the 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 entreweed 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.

NAME

STREET ADDRESS

CITY-ST-7IP

SIGNATURE:

NAME

STREET ADDRESS

C(TY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNATURE OFFICER OR DIRECT

9/13/5000

Daytime Phone #

To whom it may concern,

attachment 199000018842

I received this Corporate filing report and the amount due is indicated as \$\textit{20}\text{ \$\frac{50.95}{0.00}}\$. After investigation, I found that this was a second request for my corporate information, and the original filing amount was \$150.00. I did not receive the first report. In addition, 1999 was the first year for my Florida based corporation so I wasn't familiar with these particular filing requirements.

I followed this up with a call to one of your representatives, using the number supplied on the form. I requested that they waive the penalty. They instructed my to write this letter, explaining that I had not received the original notice, and to include a check in the amount of \$150.00, and that this was sufficient.

Sincerely,

William Colditz

President, Colditz, Business Development, Inc.