

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000019819

1. Entity Name

OPTIONS-INTELLIGENCE, INC.

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90964 014 ***150.00

Principal Place of Business

Mailing Address

182 MARLIN CIRCLE
PANAMA CITY FL 32411-7256

POST OFFICE BOX 27256
PANAMA CITY FL 32411-7256

00000000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

730 EAST CRISAFULLIE RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For

59-3562185

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

32953 USA

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

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 \$150.00
After MAY 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTD ☐ Delete
NAME DRABIK, DAVID L
STREET ADDRESS 182 MARLIN CIRCLE
CITY-ST-ZIP PANAMA CITY FL 32411-7256

TITLE PTD ☐ Change ☐ Addition
NAME DAVID L. DRABIK
STREET ADDRESS 730 EAST CRISAFULLIE RD
CITY-ST-ZIP MERRITT - FLA 32953

TITLE SVD ☐ Delete
NAME DRABIK, LEONARD G
STREET ADDRESS 182 MARLIN CIRCLE
CITY-ST-ZIP PANAMA CITY FL 32411-7256

TITLE SVD ☒ Change ☐ Addition
NAME LEONARD G. DRABIK
STREET ADDRESS 1925 BACONS BRIDGE RD #69
CITY-ST-ZIP SUMMERVILLE, S.C. 29485

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

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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 all other like empowered.

SIGNATURE:

Signature of David L. Drabik
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/00

Date

843-821-1476

Daytime Phone #

CR2E034 (9/99)