

2000 UNIFORM BUSINESS REPORT (UBR)

8/

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

08-28-2000 90061 045 ***150.00

DOCUMENT # P99000020930

1. Entity Name

MAJESTIC ORGANIZATION OPERATING CO., INC.

Principal Place of Business

1020 WASHINGTON AVENUE
 MIAMI BEACH FL 33139

Mailing Address

1020 WASHINGTON AVENUE
 MIAMI BEACH FL 33139

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

65-0901578

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**KEY CORPORATE SERVICES, INC.
 200 SOUTH BISCAYNE BOULEVARD
 20TH FLOOR
 MIAMI FL 33131**

7. Name and Address of New Registered Agent

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. ☐

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

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **GRUNFELD, JOSEPH**
 STREET ADDRESS **1020 WASHINGTON AVENUE**
 CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE **D** ☐ Delete
 NAME **YOUNG, GLADYS**
 STREET ADDRESS **1020 WASHINGTON AVENUE**
 CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/23/00

Date

305-534-1199

Daytime Phone #

Park Washington Resort

Attachment

P99000020930

309757

August 23, 2000

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: 200 Uniform Business Report
Document #: P99000020930
Majestic Organization Operating Co., Inc.

Gentlemen:

Enclosed herein please find check for \$150 .

Please be advised that we did not receive the First Notice
and as soon as we received this Notice, we promptly
processed it.

Sincerely yours,

J Grunfeld
Joseph Grunfeld

JG:rf

Encls.