2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 04, 2000 8:00 am Secretary of State DOCUMENT # P99000022871 KUNST PROPERTY SERVICES, INC. 02-04-2000 90031 024 ***158.75 Principal Place of Business Mailing Address 3705 S. FLAGLER DR., UNIT 5 3705 S. FLAGLER DR., UNIT 5 C0016977 WEST PALM BEACH FL 33405-2349 WEST PALM BEACH FL 33405 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FELNumber City & State 65-0908331 Not Applicable Country \$8.75 Additional Zìp Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent سيب يراد خنوب KUNST, JOHAN Street Address (P.O. Box Number is Not Acceptable) 3705 S. FLAGLER DR., UNIT 5 WEST PALM BEACH FL 33405 City 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 FILE NOW!!! FEE IS \$150.00 ; 9: This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 🔩 Jax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. **PVST** ☐ Change Delete TITLE KUNST, JOHAN NAME NAME STREET ADDRESS 3705 S. FLAGLER DR., UNIT 5 STREET ADDRESS CITY-ST-ZIP C(TY-57-7)P WEST PALM BEACH FL 33405 Defete TITLE ☐ Change TITLE KUNST, JOHAN NAME NAME STREET ADDRESS 3705 S. FLAGLER DR., UNIT 5 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33405 ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7)P CITY-ST-ZIP ☐ Change Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change \square : Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-702 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 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 the tecepiver or trustee suppowered to execute this opening of the corporation or the receiver or trustee suppowered to execute this opening of the corporation or the receiver of trustee suppowered to execute the corporation or the receiver of trustee suppowered to execute the corporation of the receiver of the corporation of the receiver of trustee suppowered. with all other like 3705 S. Flagler Drive changed, or on an attachment with an a

West Palm Beach, FL

Daytime Phone #

SIGNATURE: