

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000024450

1. Entity Name

TROPICAL GUTTERS II, INC.

R

FILED

Jul 19, 2000 8:00 am  
Secretary of State

05-03-2000 90014 006 \*\*\*150.00

Principal Place of Business

Mailing Address

2460 NW 17th Ave #6  
Pompano Beach, FL 33064

2460 NW 17th Ave #6  
Pompano Beach FL 33064

2. Principal Place of Business

3. Mailing Address

2460 NW 17th Ave

2460 NW 17th Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Bay #6

Bay #6

City & State

City & State

Pompano Beach FL

Pompano Beach

Zip

Country

Zip

Country

33064

USA

33064

USA

4. FEI Number

65-0903007

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KAISER, JEFFREY P  
9825 WEST SAMPLE ROAD  
SUITE 201  
CORAL SPRINGS FL 33065

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
ROMERO, DIAN E  
5050 S.E. 30TH ST. APT C  
OCALA FL 34471

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Change Addition

TITLE  
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CITY-ST-ZIP  
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CITY-ST-ZIP  
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CITY-ST-ZIP  
Change Addition

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STREET ADDRESS  
CITY-ST-ZIP  
Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Change 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-13-00 561-375-8789

Date

Daytime Phone #



ATTACHMENT

P9900002450

/18687

7-13-00

To: Whom it may concern

my LBR was mailed  
out on 4-24-00 for Tropical  
Gutters II Inc. along with  
my payment of \$150.00.

However they did not  
my FEI number #65-090300  
filled out on form. Per my  
conversation with Michelle  
she said they sent out a rejection  
letter on May 10, 00 which I  
did not receive because they  
mailed to old address: 2031 NW 22<sup>ND</sup>,  
Pompano Beach, FL 33069.

I wish to request that you  
waive penalties, because they  
already have my money and  
I did not receive my rejection letter.

new address:  
Tropical Gutters II Inc  
2460 NW 17<sup>th</sup> Lane box #6  
Pompano Beach, FL 33064

Sincerely

Wendy Slater

\* Please send Confirmation Phone #  
letter to above address 561-375-8789

Thank you