

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000030185

1. Entity Name
UNIVERSAL THOUGHTS, INC.

FILED
Aug 02, 2000 8:00 am
Secretary of State

08-02-2000 90123 042 ***150.00

Principal Place of Business
327 N "L" STREET
LAKE WORTH FL 33460

Mailing Address
327 N "L" STREET
LAKE WORTH FL 33460

2. Principal Place of Business

712 LAKE AVE

3. Mailing Address

712 LAKE AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
LAKE WORTH FL

City & State
LAKE WORTH FL

4. FEI Number
65-0913496

Applied For
Not Applicable

Zip Country
33460 PALM BEACH

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33460 PALM BEACH

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

HOLLINGSHEAD, AGNES S
2240 WOOLBRIGHT ROAD
SUITE 411
BOYNTON BEACH FL 33426

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 PVST
NAME SARTORIO, JOSEPH
STREET ADDRESS 327 N "L" STREET
CITY-ST-ZIP LAKE WORTH FL 33460 ☐ Delete

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

TITLE D
NAME SARTORIO, JOSEPH
STREET ADDRESS 327 N "L" STREET
CITY-ST-ZIP LAKE WORTH FL 33460 ☐ Delete

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

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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:

Joseph Sartorio
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR: E034 (5/00)

Attachment
D# 4990003085
DW15659



7/24/00

To Whom It May Concern,

As per my phone conversation today, I have explained that this is my first notice for my 2000 Uniform Business Report. I have also explained that the address was incorrect and have made changes accordingly. Please find enclosed a check for \$150.00 as I was instructed by your representative on the phone.

Thank you.

Joseph A. Sandoz