

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000033934

1. Entity Name

ADMIRAL 2000, INC.

Principal Place of Business

Mailing Address

125 EAST DRIVE
MELBOURNE FL 32904

302 W OSCEOLA LANE
COCOA BEACH FL 32931

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 **APPLIED FOR**
59-3617545

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

WALLIS, MICHAEL M ESQ
1221 EAST NEW HAVEN AVE
MELBOURNE FL 32302

Name **DANIEL VISLOCKY**

Street Address (P.O. Box Number is Not Acceptable)

302 WEST OSCEOLA LANE

City **COCOA BEACH**

FL

Zip Code **32931**

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]

DANIEL VISLOCKY **PRESIDENT**

ADMIRAL 2000 INC

4 JAN 2001

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, 2001 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
NAME
STREET ADDRESS
CITY-ST-ZIP
PVST
VISLOCKY, DANIEL
302 W OSCEOLA LANE
COCOA BEACH FL 32931 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
VISLOCKY, DANIEL
302 W OSCEOLA LANE
COCOA BEACH FL 32931 ☐ Delete

TITLE
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☐ 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]

DANIEL VISLOCKY **PRESIDENT**

4 JAN 2001

321-868-6972

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

0000064

FILED
Jan 17, 2001 8:00 am
Secretary of State

01-17-2001 90077 027 ***150.00

0000064



DO NOT WRITE IN THIS SPACE