

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000039602

1. Entity Name

EBANKS ENTERPRISES OF CENTRAL FLORIDA, INC.

(R)

FILED
Aug 15, 2000 8:00 am
Secretary of State

08-15-2000 90019 027 ***150.00

Principal Place of Business

1322 N. PINE HILLS RD.
ORLANDO FL 32808

Mailing Address

1322 N. PINE HILLS RD.
ORLANDO FL 32808

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

59-3574348

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

EBANKS, DONALD
6209 W ROBINSON ST.
ORLANDO FL 32835

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 ☐ Delete
NAME **D**
STREET ADDRESS **EBANKS, DONALD**
CITY-ST-ZIP **6209 W ROBINSON ST.**
ORLANDO FL 32835

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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]*

SIGNATURE DONALD J. EBANKS

DIRECTOR

08-08-00

(407) 965-8211

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

Attachment Doc#:

081500

P99000039602

A0072784

August 8, 2000

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

Dear Sirs:

Re: Ebanks Enterprises of Central Florida, Inc
Document No. P99000039602

We enclose herewith the Uniform Business Report for the year 2000 along with the fee of One Hundred and Fifty Dollars (\$150.00). Our mail was rerouted incorrectly, and we never received our 2000 Uniform Business Report. Our Accountant recently made us aware that we had not submitted our Uniform Business Report for the year 2000.

We realize that this report is late in coming and request an abatement of any associated penalties. Again, we apologize for the delay and assure you that this will not happen again.

Respectfully,

Ebanks Enterprises of Central Florida, Inc.


Donald Ebanks
President