## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## FILED DOCUMENT # **P99000040833** Apr 21, 2000 8:00 am Secretary of State 1. Entity Name COLUMBUS BLVD., INC. 04-21-2000 90022 032 \*\*\*155.00 Principal Place of Business Mailing Address 4351 CAROL ANN RD. 4351 CAROL ANN RD. SARASOTA FL 34233-3722 SARASOTA FL 34233 3. Mailing Address 2. Principal Place of Business PINET PLUT TORREY PINES BLVD 3713 TORREY Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State RASOTA Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired SARASOTA 34238 SARASUTA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WEINSTEIN WEINSTEIN, PAECIA S Street Address (P.O. Box Number is Not Acceptable) 4351 CAROL ANN ROAD SARASOTA FL 34233 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 (NOTE: Registered Agent signature required when reinstating) 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 Tax 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 12. 11. WEINSTEIN, MORRIS L 3713 TORREY PINES BLUD TITLE ☐ Delete WEINSTEIN, MORRIS L NAME 4351 CAROL ANN RD. STREET ADDRESS STREET ADDRESS SARASOTA FL 34238 CITY-ST-ZIP SARASOTA FL 34233 CITY-ST-ZIP TITLE Addition TITLE BALNO, JOAN M NAME NAME 2137 WOOD HOLLOW WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34235 CITY-ST-ZIP WEINSTEIN, PAECIAS BLUD 3713 TORREY PINES BLUD ☐ Addition TITLE ☐ Delete WEINSTEIN, PAECIA S NAME NAME 4351 CAROL ANN RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34233 CITY-ST-ZIP TITLE ☐ Change Addition BALNO, RICHARD NAME 2137 WOOD HOLLOW WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34235 CITY-ST-ZIP Delete TITLE Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

CR2E034 (9/99)