

2000 UNIFORM BUSINESS REPORT (UBR)

0425405

DOCUMENT # P99000041259

Page 1 of 2

1. Entity Name

SEMBLER/TREASURE FLORIDA, INC.

Principal Place of Business

5858 CENTRAL AVE.
ST. PETERSBURG FL 33707

Mailing Address

5858 CENTRAL AVE.
ST. PETERSBURG FL 33707-1728

[Handwritten Signature]

FILED

00 APR 27 AM 9:27



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

PO Box 41847

Suite, Apt. #, etc.

City & State

St. Petersburg, FL 33707

Zip

Country

4. FEI Number

59-3583068

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

SHER, CRAIG H
5858 CENTRAL AVE.
ST. PETERSBURG FL 33707

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 \$150.00
After MAY 1, 2000 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	D SEMBLER, MELVIN F 5858 CENTRAL AVE. ST. PETERSBURG FL 33707	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEMBLER, GREGORY S 5858 CENTRAL AVE. ST. PETERSBURG FL 33707	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEMBLER, BRENT W 5858 CENTRAL AVE. ST. PETERSBURG FL 33707	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHER, CRAIG H 5858 CENTRAL AVE. ST. PETERSBURG FL 33707	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALFONSO, CARLOS 5858 CENTRAL AVE. ST. PETERSBURG FL 33707	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BISELI, RICHARD 5858 CENTRAL AVE. ST. PETERSBURG FL 33707	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DV 600003236746 -05/03/00--01054--025 ****158.75 ****158.75	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> 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:

[Handwritten Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sher, President, 4/26/2000 737-384-6000
Sembler/Treasure Florida, Inc. Daytime Phone #

CR2E034 (9/99)

20000 Uniform Business Report (continued from page 1)

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Sembler/Treasure Florida, Inc.

EIN: 59-3583068

Block 12:

Additions:

Title: V
Name: Fuqua, Jeffrey S.
Address: 5858 Central Avenue
St. Petersburg, FL 33707

Title: V
Name: Murphy, David E.
Address: 5858 Central Avenue
St. Petersburg, FL 33707