

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000041531

1. Entity Name

TODDLERWATCH.COM INC.

**FILED**  
**Mar 13, 2000 8:00 am**  
**Secretary of State**

03-13-2000 90010 010 \*\*\*150.00

Principal Place of Business

16105 NE 18 AVENUE  
NORTH MIAMI BEACH FL 33162

Mailing Address

16105 NE 18 AVENUE  
NORTH MIAMI BEACH FL 33162-4749

2. Principal Place of Business

2500 Weston Road, #401

3. Mailing Address

2500 Weston Road, #401

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Weston, FL 33331

City & State  
Weston, FL 33331

4. FEI Number  
65-0924274

Applied For

Not Applicable

Zip

Country  
USA

Zip

Country  
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RONES, VICTOR K  
16105 NE 18 AVENUE  
NORTH MIAMI BEACH FL 33162

7. Name and Address of New Registered Agent

Name  
Mark C. Perry, Esq.

Street Address (P.O. Box Number is Not Acceptable)  
2455 East Sunrise Boulevard

Suite 905

City  
Fort Lauderdale

FL

Zip Code  
33304

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

*Mark C. Perry*

MARK C. PERRY

2/28/00

Signature based on printed name of registered agent and date 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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
LANG, THOMAS J  
548 WATERPOINT  
WESTON FL 33326 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
LANG, CHRISTINE C  
548 WATERPOINT  
WESTON FL 33326 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D/Chairman  
LANG, THOMAS J.  
2500 Weston Road, #401  
Weston, FL 33331 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D/President  
LANG, CHRISTINE C.  
2500 Weston Road, #401  
Weston, FL 33331 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D/CFD  
BUKOWSKI, ED  
2500 WESTON ROAD, #401  
WESTON, FL 33331 ☐ Change ☒ Addition

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

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

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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRISTINE LANG

2/15/00

Date

954-385-4500

Daytime Phone #

CR2E034 (9/99)